



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Earl Russ Jr Date 1-25-23
Site Address: 255 Stoney Creek Dr Sanford NC 27332 Phone 919-343-1975
Subdivision: _____ Lot _____
Description of Proposed Work: 10x12 bathroom addition Total Job Cost \$28,900.⁰⁰

General Contractor Information

Tommy Core's Residential Construction LLC 910-985-2340
Building Contractor's Company Name Telephone
2481 Plain View Hwy Dunn NC 28334 Tommycoresresidential Constr.
Address Email Address @gmail.com
93-2633743 HEATED SQ FT _____ GARAGE SQ FT _____
License # _____

Electrical Contractor Information

Description of Work lights & recepticals Service Size: _____ Amps T-Pole: Yes No
Parkers Electric 910-984-6810
Electrical Contractor's Company Name Telephone
167 Stone Henge Dr Dunn NC 28334
Address Email Address
31658
License # _____

Mechanical/HVAC Contractor Information

Description of Work *Will be done by homeowner's after jobs completed
2/1/23 26 Jan 2023 Spt Heater
Mechanical Contractor's Company Name Telephone _____
Address Email Address _____
License # _____

Plumbing Contractor Information

Description of Work commode + vanity + tub # Baths _____
Jacksons Plumbing 910-990-0249
Plumbing Contractor's Company Name Telephone
201 Dawson Rd Dunn NC 28334
Address Email Address
15727
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone _____

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** and if **any** changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Tommy B Cole
Signature of Owner/Contractor/Officer(s) of Corporation

1-25-23
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: *Tommy B Cole* owner: *Tommy Cole's Residential* Date: *1-25-23*
Construction LLC

