

Application # BRES1911-0029  
ERES1911-0030  
INES1911-0004

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Michael & Jean Hale Date: 11-12-19  
Site Address: 16 Village Glen Way, Dunn, NC 28334 Phone: 843-597-4637  
Subdivision: Village at Huntington Lot: \_\_\_\_\_  
Description of Proposed Work: 34x34 GARAGE

**General Contractor Information**

James Robert Williams 910-990-5850  
Building Contractor's Company Name PO Box 116 Telephone  
107 West Clinton Street, Salem, NC  
Address 28385 Email Address  
29502  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work WIRE/SERVICE 34x34 GARAGE Service Size: 400 Amps T-Pole:  Yes  No  
Burd's Electric Repair Service 919-894-3139  
Electrical Contractor's Company Name Telephone  
143 Mingo Road, Benson, NC  
Address 27504 Email Address  
20256L  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work N/A  
Mechanical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work N/A # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
License # \_\_\_\_\_

**Insulation Contractor Information**

Parker Brothers, Inc., 825 Kitty Fork Road 910-990-5928  
Insulation Contractor's Company Name & Address Telephone  
Clinton, NC 28328

**\*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.

Michael W. Hill  
Signature of Owner/Contractor/Officer(s) of Corporation

11-12-19  
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: J. Robert Williams James Robert Williams Date: 11-12-19