



Harnett County Central Permitting

PO Box 65 Lillington, NC 27548  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # MRES1809-0036

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: Tim Deranek Date: 9/24/18  
Site Address: 400 Wyndham Place Dr, Fuy Phone: 919-353-4613  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Replace heatpump on 1st floor

**General Contractor Information**

Building Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work: Connect ~~new~~ heatpump Service Size: \_\_\_\_\_ Amps T-Pole:  Yes  No  
Weather Master Telephone: 919-266-4415  
Electrical Contractor's Company Name \_\_\_\_\_  
Address: 3057 Village Dr, Knightdale NC 27545 Email Address: mnewsome@weathermasterhvac.com  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work: Replace heatpump for 1st floor  
Weather Master Htg & A/C, Inc Telephone: 919-266-4415  
Mechanical Contractor's Company Name \_\_\_\_\_  
Address: 305 Village Dr, Knightdale Email Address: mnewsome@weathermasterhvac.com  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address \_\_\_\_\_  
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:

M. Jensen  
Signature of Owner/Contractor/Officer(s) of Corporation

9/24/18  
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: M. Jensen

Date: 9/24/18





# MECHANICAL RESIDENTIAL

910-893-7525

www.harnett.org

PERMIT NUMBER

MRES1809-0036

<b>JOB ADDRESS:</b> 400 WYNDHAM PLACE DR	<b>PERMIT SUBTYPE:</b> UP TO 2 UNIT REPLACEMENT INCLUDES ELECTRICAL	<b>PARCEL NO:</b> 0664-97-6347.000
<b>DESCRIPTION:</b> Replce Ht pump 1st floor	<b>DATE ISSUED:</b>	<b>DATE EXPIRED:</b>
<b>PLAN NAME:</b>	<b>ZONING DISTRICT:</b> RA-30 - 0.8 acres (100.0%)	

<b>APPLICANT:</b> WEATHER MASTER HEATING & A/C 305 VILLAGE DRIVE KNIGHTDALE, NC 27545	<b>PHONE:</b> (919)266-4415 <b>EMAIL:</b>
<b>CONTRACTOR:</b> WEATHER MASTER HEATING & A/C 305 VILLAGE DRIVE KNIGHTDALE, NC 27545	<b>PHONE:</b> (919)266-4415 <b>EMAIL:</b>
<b>OWNER:</b> DERANEK TIMOTHY LEE 400 WYNDHAM PLACE DR FUQUAY-VARINA, NC 27526 FUQUAY-VARINA, NC 27526-0000	<b>PHONE:</b> <b>EMAIL:</b>

### REQUIRED INSPECTIONS

INSPECTION TYPE	APPROVAL	DATE	COMMENTS
FINAL**			

Development Services  
108 E. Front St  
Lillington, NC 27546  
910-893-7525

CC SALE

MID: xxx9684  
TID: xxxx2853  
Ref #: 209099157  
Batch #: 1100206  
Date/Time: 09/25/18 09:02:54 AM  
Inv/Tkt #: 180925090226029  
Appr Code: 25429G  
Visa  
4xxxxxxxxxxx7733  
Keyed

Amount USD\$ 90.00

Approved

Mode: Card

CUSTOMER COPY