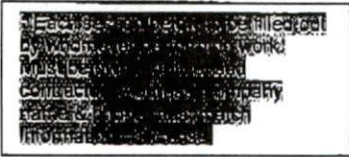




Application # WRES1903-0035

Harnett County Central Permitting

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



Application for Residential Building and Trades Permit

Owner's Name: Taylor Matthews Date: 11/26/18
Site Address: 620 Harvell Rd. Coats, NC Phone: _____
Subdivision: _____ Lot: _____
Description of Proposed Work: Replace existing HVAC System

General Contractor Information

Building Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Electrical Contractor Information

Description of Work Connect Electrical to system Service Size: _____ Amps T-Pole: Yes No
252-378-5523
Electrical Contractor's Company Name _____ Telephone _____
Jerry Gayl Taylor III, P.O.Box30015, Greenville, NC 27833 jgtaylorco@gmail.com
Address _____ Email Address _____
05401-L
License # _____

Mechanical/HVAC Contractor Information

Description of Work Replace existing Heat Pump with a Duel Fuel System
Mechanical Contractor's Company Name _____ Telephone _____
See Above (Electrical Information)
Address _____ Email Address _____
07908-H2H3
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 sections 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 certified all subcontractors~~ ~~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 is \$150.00. After 2 years it is \$200.00. Fee per current fee schedule.~~

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

11/26/18
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: [Signature]

Date: 11/26/18