

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: Kevin Estero Date: 01/29/2020
Site Address: 151 New Castle Ln Spring Lake NC 28380 Phone: (704) 315 7081
Subdivision: Highgrove Lot: # 234
Description of Proposed Work: Condensor 3ton Changeout Total Job Cost: 1,500.00

General Contractor Information

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

Electrical Contractor Information

Description of Work reconnect power to unit Service Size: _____ Amps T-Pole: Yes No
Cedar Hill Electric (910) 323-1276
Electrical Contractor's Company Name Telephone
3688 Cedar Hill Drive Fay NC 28312 Call premier heating and air
Address Email Address @gmail.com
090666
License # _____

Mechanical/HVAC Contractor Information

Description of Work Changeout 3Ton Condensor unit outside
Premier Heating and Air (910) 965-0222
Mechanical Contractor's Company Name Telephone
581 Executive place Fay NC 28305 Call premier heating and air @
Address Email Address gmail.com
30486
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.**

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.

Country Jones
Signature of Owner/Contractor/Officer(s) of Corporation

01/29/2020
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: Country Jones Date: 1/30/2020