

Application # BRE 52003-0024

Harnett County Central Permitting PO Box 65 Lillington, NC 27546

ERES2003-0014 PRES2008-0005

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

Application for Residential Building and Trades Permit

ion on license.	
Owner's Name: Kevin & Catherine Anderson	Date: 3-10-20
Site Address: 74 Bishop Ct.	Phone: 910 -366 -4849
Subdivision: York Shive Plantation	Lot: _33
Description of Proposed Work: Merioe Elterior renovation	₩ Total Job Cost: \$23,500
General Contractor Information	on .
J. Brent Smith Construction	919-775-9714
Building Contractor's Company Name	Telephone
455 Charles Riddle Rd.	ibrent smith constructione ya
Address 42004	Email Address
License #	
Electrical Contractor Informati	
C 100 100 100 100 100 100 100 100 100 10	Amps T-Pole:YesNo
Douglas Electric, Inc. Electrical Contractor's Company Name	Telephone
754 Sanders Rd. Sanford, NC 27332	Kdouglaselectricegmail.c
Address	Email Address
18707	Zilian / Idai coo
License #	
Mechanical/HVAC Contractor Infor	mation
Description of Work	
	_
Mechanical Contractor's Company Name	Telephone
_	
Address	Email Address
License #	
Plumbing Contractor Informati	
Description of Work ren watmw	_# Baths_//\@
Reliable Plumbing	919-499-11359
Plumbing Contractor's Company Name	Telephone
1480 Zion Church Rd, Santoed, NC 27330	
Address 07151	Email Address
License #	on.
Insulation Contractor Informati	<u>on</u>
Insulation Contractor's Company Name & Address	Telephone
Insulation contractors company realite & Address	relephone

*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.

is as per current fee schedule. 3-\$0-50 3-\$0-50
Signature of Owner/Contractor/Officer(s) of Corporation 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: Agent Agent Contract Permitting Department issuing the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.