

Application # _____

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Gamebird Properties LLC	Date: 4/8/21
Site Address: 133 Taplow Trail Cameron NC 28326 Phone:	
Subdivision: Lexington Plantation	Lot: 265
Description of Proposed Work: Finish Bonus Room	_ Total Job Cost: \$8900
General Contractor Information	
Bramble Home Improvements Inc	9109880033
Building Contractor's Company Name	Telephone
5353 Red TipRd STE 107 Fayeleille NC28314 Address	Chrisbramble Quantilico
0.1= 4.1	MALE AND
84794 HEATED SQ FT 1973 GARAGE SO	QFT-441
Electrical Contractor Information	
Description of Work 14 lights, 10 receptures, 1 exhaut Service Size:	Amps T-Pole:YesNo
LiosFlectric	9105279404
Electrical Contractor's Company Name	Telephone
5211 Perry Oliver Dr Hope Mills NC28348	Lips elactric Raynail com Email Address
Address	Email Address
21117	
License # Mechanical/HVAC Contractor Inform	nation
License #	nation
License # Mechanical/HVAC Contractor Inform	nation
License # Mechanical/HVAC Contractor Inform	Telephone
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name	Telephone
License # Mechanical/HVAC Contractor Inform Description of Work	
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address	Telephone
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name	Telephone Email Address
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information	Telephone Email Address
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing add-on for remodel	Telephone Email Address on # Baths 1/2
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing add-on for remodel Plumbing Contractor's Company Name	Telephone Email Address on # Baths // 2 Glo 624 6693 Telephone
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing add-on for remodel Plumbing Contractor's Company Name	Telephone Email Address on # Baths 1/2 Glo 624 6693 Telephone Chrocato 93 Ramail.com
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing add-on for remodel Plumbing Contractor's Company Name Plumbing Contractor's Company Name (530 Calestial Pine Dr. Hope Mills NC 28349 Address	Telephone Email Address on # Baths 1/2 Glo 624 6693
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing add-on for remodel Plumbing Contractor's Company Name (530 Celestial Pine Dr Hope Mills NC 28349 Address P 34764	Telephone Email Address on # Baths 1/2 Glo 624 6693 Telephone Chrocato 93 Ramail.com
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing Add-on for remodel Plumbing Contractor's Company Name (530 Celestial Pine Dr. Hope Mills NC 28349 Address P 34764 License #	Telephone Email Address on # Baths 1/2 Glo 624 6693 Telephone Chrocato 93 Damail.com Email Address
Mechanical/HVAC Contractor Inform Description of Work Mechanical Contractor's Company Name Address License # Plumbing Contractor Information Description of Work Existing Plumbing add-on for remodel Plumbing Contractor's Company Name (530 Celestial Pine Dr Hope Mills NC 28349 Address P 34764	Telephone Email Address on # Baths 1/2 Glo 624 6693 Telephone Chrocato 93 Damail.com Email Address

*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.

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

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
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.
\underline{X} 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: his Brandle /OWNEX Date: 4/8/21