

Application #

Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

## Application for Residential Building and Trades Permit

Owner's Name: Michelle Westbrook	Da	ate11/8/2022
Site Address: 107 Ennis St. Erwin NC 28339	Phone _	910-892-1551
Subdivision:		
Description of Proposed Work: Shower to larger shower conversion w/ valve.	Total Job Cost 15,9	904
General Contractor Information		W. 100 (100 (100 (100 (100 (100 (100 (100
Building Contractor's Company Name	Telephone	
Address	Email Address	
HEATED SQ FT GARAGE S	SQ FT	
License # Electrical Contractor Informati	ion	
Description of WorkService Size	:Amps T-Pole	:YesNo
Electrical Contractor's Company Name	Telephone	
A 3 4	Email Address	
Address	Email Address	
License #		
Mechanical/HVAC Contractor Infor	rmation	
Description of Work		
Mechanicai Contractor's Company Name	Telephone	
Address	Email Address	
Addiess	Linaii Address	
License #		
Plumbing Contractor Informat	ion	
Description of Work Shower to larger shower conversion w/ valve.	# Baths	
ReBath of the Triangle	910-945-0733	
Plumbing Contractor's Company Name	Telephone	
573 Glenwood Ave. Raleigh NC 27612	stacy.craddock@	grebath.com
Address	Email Address	
29 _ 3		
License #		
Insulation Contractor Informat	ion	
Insulation Contractor's Company Name & Address	Telephone	

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.

## Harnett

have the authority to make necessary application, that the application is correct action will conform to the regulations in the Building, Electrical, Plumbing and the Harnett County Zoning Ordinance. I state the information on the above as known to me and that by signing below I have obtained all subcontractors ain these permits and if any changes occur including listed contractors, site plan, building and trade plans. Environmental Health permit changes or proposed use any responsibility to notify the Harnett County Central Permitting Department of

Affidavit for Worker's Compensation N.C.G.S. 87-14

The sent being the Compensation Officer/Agent of the Contractor or Owner Compensation insurance to cover them.

The subcontractors(s) and has obtained workers' compensation insurance to cover them.

The subcontractors(s) who has their own policy of workers' compensation insurance to cover them.

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## Town of Erwin Zoning Application & Permit Planning & Inspections Department

Permit #

Home Address 8817 W.	of the Triangle	Property Owner	Michelle	Westbrook
	estsate Park Drive #12	Home Address	107 Enn	
	, NC , 27617	City, State, Zip	Erwin, N	
	17- 9490	Telephone	910 - 89:	
Email seth.	ccool @ rebeth. com	Email	-	good 2 @ gmail. c
Address of Proposed Property	107 Ennis St	treet Erwin , N	28339	
Parcel Identification Number(s	(PIN) 0597-50-5550	ooo Estima	ted Project Cost	#15 904
What is the applicant requestir the proposed use of the subject	ng to build / what is property? Be specific.	Bathroom R	emodel	
Description of any proposed impr to the building or property	ovements Shower to	larger show		
What was the Previous Use of	the subject property?	N/A	an new	valve.
Does the Property Access DOT		Yes		
Number of dwelling / structure	es on the property already	One		
Property / Parcel Size		Residential -	0-18 660	S 100 % Harast
MUST circle one that applies to pr	operty Existing/Proposed		Or	100 0 Harnet
	Existing/Proposed			
swers, statements, and other infor	r duly authorized agent/repres rmation herewith submitted ar	te in all respects true a	nd correct to the	best of their knowledge
nd belief. The undersigning party oplication. Upon issuance of this p gulations, and the laws of the State undersigning party authorizes to the undersigning party authorizes to the state of the state undersigning party authorizes to the state of the state undersigning party authorizes to the state of th	r duly authorized agent/repres mation herewith submitted ar understands that any incorrect permit, the undersigning party e of North Carolina regulating	sentative thereof certil te in all respects true a t information submitte agrees to conform to such work and to the	nd correct to the ed may result in t all applicable tow specifications of	best of their knowledge the revocation of this on ordinances, zoning plans herein submitte
nd belief. The undersigning party oplication. Upon issuance of this per gulations, and the laws of the States undersigning party authorizes this application as approved.	r duly authorized agent/repres mation herewith submitted ar understands that any incorrect permit, the undersigning party e of North Carolina regulating	sentative thereof certil te in all respects true a t information submitte agrees to conform to such work and to the	nd correct to the ed may result in t all applicable tow specifications of	best of their knowledge the revocation of this on ordinances, zoning plans herein submitted
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