Harnett

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

Application # _
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: Francel Matthews	Data 3 -22-23
Site Address: 85 Barron's Run west Spri	or Lake NS 28310 910-503 017-
Subdivision: Anderson Creek	Lot
Subdivision: Anderson Creek Description of Proposed Work: Tankless water Heater	Lot
General Contractor Information	rotal Job Cost
- Silving Solitation Information	<u>on</u>
Building Contractor's Company Name	Telephone
Address	Email Address
License #	3Q FT_
License #	
Description of Work Receptacle Installation Service Size	On : Amps T-Pole: Voc No
ALL MURENZIE Electric	9/9-353-2134
Lieutical Contractor's Company Name	Telephone
1330 John Rosser Rd, Sanford NC 27332	
Addiess	Email Address
License #	
Machanical/HVAC Contractor Info	mation
Description of Work Tanteless water heater installat	- AND
Blossman Gas	an with gas piping
Blossman 6-95 Mechanical Contractor's Company Name	9/9-775-3013 Telephone
221 5 Horner Blud, Sanford, NC 27330	relephone
Address	Email Address
33164	
License #	
Plumbing Contractor Information	<u>on</u>
Description of Work water line installation	# Baths
Fix-It Plumbing Services Inc Plumbing Contractor's Company Name	9/9-776-7870 Telephone
2020 / an Alan C C / was about	Telephone
2839 Lee Ave, Sanford, NC 27332 Address	mitchell. Frx: tplnmbing @ gmail . com Email Address
33921	Email Address
License #	
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	Tologia
Traine a Addiesa	Telephone

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

strong roots • new growth



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.

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:Date:	