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 or licensed contractor Address company name & phone must match

Application for Residential Building and Trades Permit

phone must match	
Owners Name Curber and Homes Tic.	Date <u>9/18/18</u>
Site Address P.O. Box 127 Dunn, MP.	Phone 910-891-4345
Directions to job site from Lillington TAKE Hary 421	5 Jonards Bujes Creek
IL outo Neil's Creek Rd, 30	approx 2 miles to
sub on left.	
Subdivision South Gelk .	Lot <i>43</i>
Description of Proposed Work <u>NSF</u>	# of Bedrooms $3$
Heated SF 935 Unheated SF 735 Finished Bonus Room?	Crawl Space Slab
General Contractor Information	an 807. 42115.
Building Contractor's Company Name	Telephone
P.O. BOX 727 DUM. N.C. 28335	
Address	Email Address Vahoo. com
<u>59493</u> License #	Yanus. con
Description of Work NEW Residential Service Size 200 Amps T-Pole Yes No	
Description of Work NEW Kesidential Service Size &	
Electrical Contractor's Company Name	<u>419-499-5389</u>
546 Leslie Dr. Santora M.	Telephone
Address	Email Address
12007-U	
License #	
Mechanical/HVAC Contractor Inform  Description of Work New Single Family Reside	ental
	919-1329-0686
Mechanical Contractor's Company Name	Telephone,
343 Shipwash Dr. Garner, N.C. 27529	NA.
Address	Email Address .
2001	
License #  Plumbing Contractor Informatio	$\frac{n}{2}$
Description of Work New Residential	# Baths
Placer Contract Plumbing. IN.	919-868-0959
Plumbing Contractor's Company Name	Telephone
304 Quail Hollow Ext- Santord, N.C.	- MA
Address 2733Z 273160	Email Address
License #	110(11)
Insulation Contractor Information	
INSWATING INC. 5902 taystivile Ref	Tolophone
Insulation Contractor's Company Name & Address Rabigation	Telephone
"d 160"	

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 - Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee s 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 Officer/Agent of the Contractor or Owner \_ Owner General Contractor 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 Company or Name

Sign w/Title