



Application # SFD1809-0030

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 information on license!

**Application for Residential Building and Trades Permit**

Owner's Name: Joey and Lisa Raynor Date: 11/28/2018  
Site Address: 109 Lavendale Lane, Dunn, NC 28334 Phone: 910-658-7232  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: New Residential Construction - Single Family Dwelling

**General Contractor Information**

Kevin Tyndall Builders, Inc. 910-237-4237  
Building Contractor's Company Name Telephone  
1014 West Core Rd, Dunn, NC 28334 tyndalladmin@charter.net  
Address Email Address  
71658  
License #

**Electrical Contractor Information**

Description of Work New Residential - Single Family Dwelling Service Size: 200 Amps T-Pole:  Yes  No  
Byrd Electric 919-894-3139  
Electrical Contractor's Company Name Telephone  
143 Mingo Road, Benson, NC 27504  
Address Email Address  
20256-L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Residential - Single Family Dwelling  
Beasley's Heating and Air, Inc 919-894-4248  
Mechanical Contractor's Company Name Telephone  
57 WC Beasley Lane, Coats, NC 27521  
Address Email Address  
9497  
License #

**Plumbing Contractor Information**

Description of Work New Residential - Single Family Dwelling # Baths 2  
Double J Plumbing 910-814-7705  
Plumbing Contractor's Company Name Telephone  
614 Byrd Road, Bunn Level, NC 28323  
Address Email Address  
21649  
License #

**Insulation Contractor Information**

Parker Brothers Inc. 825 Kitty Fork Rd, Clinton NC 28329 910-564-4132  
Insulation Contractor's Company Name & Address Telephone

**\*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

11/28/2018

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: Contractor Date: 11/28/2018  
President, KTB