

Application # 1811 - 0005

\* 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. Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## Application for Residential Building and Trades Permit

on on license.	
Owner's Name: Randy Wilkins & Taylor waters	Date: 10-4-18
Site Address: 2495 Sherriff Johnson Rd Lillington NC	27546 Phone: 910-984-9042
Subdivision:	Lot:
Description of Proposed Work: New Const.	
General Contractor Informatio	
Sevenity Built Homes, Inc.	910-984-7042
Building Contractor's Company Name	Telephone
PO Box 1417 Lillington NC 27546	Klawrence @ Capital marble creations. com
Address	Email Address
63787	
License #	
Description of Work New Const  Electrical Contractor Information Service Size:	ON Amns T-Pole: V Vas No
Maby's Electrical	<u>APO</u> Amps T-Pole: <u>V</u> YesNo 919-868-6012
Electrical Contractor's Company Name	Telephone
731 Maby Rd Angier NC 27501	releptione
Address	Email Address
150114	Email / Idal 655
License #	
Mechanical/HVAC Contractor Information	mation_
Description of Work New Const	
Jim Heating: Air	910-897-5501
Mechanical Contractor's Company Name	Telephone
724 Turlington Rd Dunn NC 28334	
Address	Email Address
17164	
License #	
License #	
Plumbing Contractor Information	on o
Plumbing Contractor Information	
Description of Work New Const  Jason Bavefoot  Plumbing Contractor's Company Name	on # Baths
Description of Work New Const  Jason Bavefoot  Plumbing Contractor's Company Name	# Baths
Plumbing Contractor Information  Description of Work  New Const  Jason Bavefoot  Plumbing Contractor's Company Name  5476 Timthy Rd Dunn NC 28334  Address	# Baths
Plumbing Contractor Information  Description of Work  New Const  Jason Bavefoot  Plumbing Contractor's Company Name  5476 Timthy Rd Dunn NC 28334  Address	# Baths <u> </u>
Plumbing Contractor Information  Description of Work  Jason Bavefoot  Plumbing Contractor's Company Name  5476 Timbhy Rd Dunn IVC 28334  Address  20694P-1  License #	# Baths
Plumbing Contractor Information  Description of Work  Jason Bavefoot  Plumbing Contractor's Company Name  5476 Timthy Rd Dunn IVC 28334  Address  20694P-1  License #  Insulation Contractor Information	# Baths
Plumbing Contractor Information  Description of Work  Jason Bavefoot  Plumbing Contractor's Company Name  5476 Timbhy Rd Dunn IVC 28334  Address  20694P-1  License #	# Baths

\*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 seffedule. 10-4-18 Signature of Owner/Contractor/Officer(s) of Corporation 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: