

Application # <u>SFD 1908-000</u>6

* 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

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Owner's Name: Chris & Heather Pobins	Date: 1/74/19
Site Address: Hamilton Rd. Burlevel, DC	Phone: 910. 476. 4502
Subdivision: \(\subseteq \int \)	Lot: One 6.55 + Ac
Description of Proposed Work: New SFR	
General Contractor Informatio	n
Beign a Stat Real Eddle Sources Tag.	900.779.0019
Building Contractor's Company Name	
PO Box 53798 Fayetteville, NC 28305	Telephone <u>feriodential @bensto-feorstrution</u>
Address	Email Address
69633 - V	
License #	
Description of WorkService Size: 205 Amps T-Pole: ✓ YesNo	
	919. 499. 7767
Electrical Contractor's Company Name	Telephone
90 Vill Thomas Pd Cillington, UC	Telephone Noverelectic Qearth, it is
Address	Email Address
21643-4	Zman / nan see
License #	
Mechanical/HVAC Contractor Inform	<u>nation</u>
Description of Work	
Cyroling Cantor & A.v	910-339.2374
Mechanical Contractor's Company Name	Telephone
703 D Clinton die Duy De 28774	Telephone Per caroling on for fair .com Email Address
Address	Email Address
29077	
License #	
Plumbing Contractor Information	
Description of Work	# Baths 2.5 910 479 9939 Telephone Lollhaire plunbug Chofmil.com Email Address
Plumbing Contractor's Company Name	910, 479 4959
Plumbing Contractor's Company Name	Telephone
620 Gillespie & Fayetterille, NC 28306	tellhareplanting Chofmalian
Address	Email Address
32886 P-1	
License # Insulation Contractor Informati	on
Carpelland Frankfish	910.484.7118
Insulation Contractor's Company Name & Address	Telephone
	ACC

*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.

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1/21/19	
Signature of Owner/Contractor/Officer(s) of Corporation 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: Date: Date: Trille: Date:	