



Application # SFD 1903-0013

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: Curr-Well Developments LLC Date: 3-8-19
Site Address: 198 Curr Well Dr. Benson 27504 Phone: (919) 639-2023
Subdivision: Willowbrook Lot: 10
Description of Proposed Work: Single Family Dwelling

General Contractor Information

Stancil Builders Inc. (919) 639-2073
Building Contractor's Company Name Telephone
466 Stancil Rd. Angier NC 27501 wendy@stancilbuilders.com
Address Email Address
34533
License #

Electrical Contractor Information

Description of Work SFD Service Size: 200 Amps T-Pole: Yes No
SNO Electrical (919) 427-6952
Electrical Contractor's Company Name Telephone
19655 NC 210 Hwy Angier NC 27501
Address Email Address
13075-L
License #

Mechanical/HVAC Contractor Information

Description of Work SFD
Stephenson Heating & Air Inc. (919) 329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr. Garner NC 27529
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work SFD # Baths 2
Barnes Plumbing Inc. (919) 422-2133
Plumbing Contractor's Company Name Telephone
239 Millwood Lane Angier NC 27501
Address Email Address
P17735
License #

Insulation Contractor Information

Tatum Insulation II Inc. 519 Old Drug Store Rd. (919) 661-0999
Insulation Contractor's Company Name & Address Telephone
Garner NC 27529

***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.

Wendy Dorman

Signature of Owner/Contractor/Officer(s) of Corporation

3-8-19

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: *Wendy Dorman*

Date: *3-8-19*