

Application # 5 + 0 1903 - 0058

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

tion on acense.	1 (
Owner's Name: James - Connic Johnson	Date: 2 21 (9
Site Address: 34 Nynnage Dr. Angier	Phone:
Subdivision: Wynnridge	Lot: _//_
Description of Proposed Work: New 5FD	
General Contractor Information	
Homes by Michael Ford, UC Building Contractor's Company Name	919-553-1055
Building Contractor's Company Name	Telephone
PO BOX 9 Clayton, NC 27528	Telephoneinfo@homesbyford.com Email Address
73459	Email Address
License #	
Electrical Contractor Information	
Description of Work Service Size:	200 Amps T-Pole: Yes INo
R.A. Jackson Electric	919-894-5367
Electrical Contractor's Company Name	Telephone
9261 Raleigh Rd. Benson, NC 27504 Address	Email Address
21144	Linaii Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work	- 2
Stephenson Heating + Air, Inc. Mechanical Contractor's Company Name	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Dive Garner, NC 27529	Empil Address
Address 18644	Email Address
License #	
Plumbing Contractor Information	
Description of Work	# Baths 2
White's Plumbing LLC Plumbing Contractor's Company Name	919-435-0736
	Telephone
PO Box 1286 Youngshile, NC 27596	_# Baths_2
Address	Email Address
16941 License #	
Insulation Contractor Information	
Insulation Contractor's Company Name & Address Garrer, NC 275 GTelephone	
Insulation Contractor's Company Name & Address Company NC 2752 Telephone	

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

strong roots · new growth



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 subconfactors 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.

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: 22119	