

Application # <u>SFD 19 03 - 60</u> 33

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

on on license.	
Owner's Name: Custom Contracting Corporation	<i>V</i> Date:
Site Address: 144 Brower Road CAMERON NO	<u> 28326</u> Phone: <u>9/9-7/75-1491</u>
Subdivision: Brower	Lot: <u>3</u>
Description of Proposed Work: New Single family	hone
General Contractor Information	1
Custom Contracting Corporation	919-775-1497
Building Contractor's Company Name	Telephone
1504 So. HORNER Blud. SANFORD, Nº 27330	VANGRICE @ GROCE COMPAN 18. Email Address Com
Address	Email Address Com
8664	
License #	_
Description of Work wire house Service Size:	<u>n</u> 20⊘ Amps T-Pole:
Billings Electric	919-770-6884
Electrical Contractor's Company Name	Telephone
736 John Rosser Road SANFORD, NC 27330	
Address	Email Address
18798-U	
License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work <u>NEAT PUMPS</u>	
AFORDA DIE HEATING & AIR Mechanical Contractor's Company Name P.D. Rox 326 Lemon Sorivas NC 28355	919-770-3260 Telephone high flying 4x4@ annil. con
Mechanical Contractor's Company Name	Telephone
TOTAL STATE OF THE	high flying 4x4@gMail. Con
Address	Email Address U
20046	
License # Plumbing Contractor Information	on.
A/ / /	
Description of Work Plymb house	_# Baths
Reliable Plumbing	919 - 1775 - 5782 Telephone
Plumbing Contractor's Comparty Name	
1480 Zion Church Rd, Sanford, NC 27330	Reliable plumbing @ windstream. Email Address net
Address	Nel Nel
License #	
Insulation Contractor Information	<u>on</u>
Prime Every Group, 2300 Westinghouse Blud.	919-821-3288
Insulation Conffactor's Company Name & Address	Telephone
Suite 105 RAleigh NC 2	2604

*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. 1/11/19 Date

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: Date: 4////	