



Application # SFD1905-0013

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: _____ Date: _____

Site Address: 374 Wynnridge Drive Angier, NC 27501 Phone: _____

Subdivision: Wynnridge Lot: 21

Description of Proposed Work: New SFD

General Contractor Information

Homes by Michael Ford, LLC
Building Contractor's Company Name

919-553-1055
Telephone

PO Box 9 Clayton, NC 27528
Address

info@homesbyford.com
Email Address

73459
License #

Electrical Contractor Information

Description of Work Electrical Service Size: _____ Amps T-Pole: Yes No

R. A. Jackson Electric, Inc.
Electrical Contractor's Company Name

919-894-5367
Telephone

9261 Raleigh Rd. Benson, NC 27504
Address

rajacksonelectric@embargo.mail.com
Email Address

21144
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC

Stephenson Heating & Air, Inc.
Mechanical Contractor's Company Name

919-329-0686
Telephone

343 Shipwash Drive Garner, NC 27529
Address

stephensonhvac@aol.com
Email Address

18644
License #

Plumbing Contractor Information

Description of Work Plumbing # Baths 2

White's Plumbing, LLC
Plumbing Contractor's Company Name

919-435-0736
Telephone

PO Box 12816 Youngsville, NC 27596
Address

whitesplumbingllc@gmail.com
Email Address

16941
License #

Insulation Contractor Information

Tatum Insulation 519 Old Drug Store Rd. Garner, NC
Insulation Contractor's Company Name & Address

919-661-0999
Telephone

***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.



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

4/25/19

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

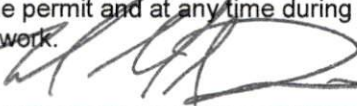
The undersigned applicant being the:

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:  _____ Date: 4/25/19