



Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.hamett.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: Terry & Rose Wilson Date: 6/27/2019
Site Address: NC 55 E. Dunn, NC 28334 Phone: 919-534-6702
Subdivision: _____ Lot: _____
Description of Proposed Work: New SFD

General Contractor Information

Whittenton Builders Enterprises Inc 919-427-8465
Building Contractor's Company Name Telephone
843 Neighbors Rd Dunn NC 28334 todd@whittentonbuilders.com
Address Email Address
48607
License #

Electrical Contractor Information

Description of Work New SFD Service Size: 200 Amps T-Pole: Yes No
Mabry's Eletrical Service 919-639-4837
Electrical Contractor's Company Name Telephone
731 Mabry RD
Address Email Address
15077U
License #

Mechanical/HVAC Contractor Information

Description of Work New SFD
Beasley's Heating & Air 919-894-4248
Mechanical Contractor's Company Name Telephone
57 WC Beasley Lane
Address Email Address
9497
License #

Plumbing Contractor Information

Description of Work New SFD # Baths 2.5
Steven Stanley Plumbing
Plumbing Contractor's Company Name Telephone
2287 Parker Rd Four Oaks NC
Address Email Address
20013
License #

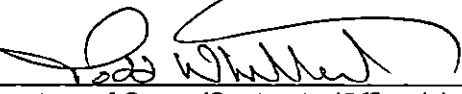
Insulation Contractor Information

Tatum Insulation 919-661-0999
Insulation Contractor's Company Name & Address 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

06-27-2019
Date

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

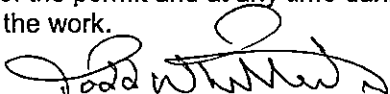
The undersigned applicant being the:

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:  PRESIDENT

Date: 06-27-2019