



Application # _____

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: Michael Weaver / Jessica Smith Date: 3/10/2020

Site Address: 503 Ballard Rd. Phone: _____

Subdivision: N/A Lot: N/A

Description of Proposed Work: Build a New Residential House Total Job Cost: \$481,476

General Contractor Information

SRS Contracting and Landscaping Inc.
Building Contractor's Company Name

(919) 661-2996
Telephone

6349 River Rd. Fuquay - Varina NC 27526
Address

sandscontracting@gmail.com
Email Address

59770
License #

Electrical Contractor Information

Description of Work Electrical Installation Service Size: 400 Amps T-Pole: Yes No

Dawson's Electric
Electrical Contractor's Company Name

(919) 201-3841
Telephone

6009 Cotton Rd. Fuquay - Varina NC 27526
Address

Email Address

25948-L
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC Installation

OC's Heating and Air
Mechanical Contractor's Company Name

(919) 369-2657
Telephone

1539 Wade Stephenson Rd Holly Springs NC 27540
Address

Email Address

H-312655
License #

Plumbing Contractor Information

Description of Work Plumbing Installation # Baths 3

Camden Plumbing
Plumbing Contractor's Company Name

(919) 669-4650
Telephone

PO Box 1359 Fuquay - Varina NC 27526
Address

Email Address

18903
License #

Insulation Contractor Information

Allied Spray Foams 2624 Aunt Fenny Rd (919) 971-0809
Insulation Contractor's Company Name & Address Telephone

Holly Springs NC 27540

***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.

[Handwritten Signature]

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

3/14/2020
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: *Steve Butts, President* Date: 3-10-20