SED1908-0004

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

Application for Residential Building and Trades Permit

Owners Name Floyd Properties and Development	Date
Site Address 272 Scholar Drive	
Directions to job site from Lillington	
Subdivision Anderson Creek Club	
Description of Proposed Work Single Family New Construct	tion # of Bedrooms 5
Heated SF 334 Unheated SF 507 Finished Bonus Room? Crawl Space V Slab General Contractor Information	
Floyd Properties and Development Building Contractor's Company Name	(910) 423-6700 Telephone
901 Arsenal Avenue Fay, NC 28306 Address	Email Address
74174 License #	
Electrical Contractor Information	
Butord Electric, Inc. Electrical Contractor's Company Name	(910) 818-0994 Telephone
2978 Gillespie St., Fay, NC 28306 Address 31424-U	<u>abelectric</u> 210@yahoo. Com Email Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work New Construction	(2.)22
Mechanical Contractor's Company Name	(910) 237-0779 Telephone
1910 Pamalee Dr., Fay, NC 28301 Address	Chacco O embargmail.com Email Address
PH 2-3, 16108	
License # Plumbing Contractor Information	
Description of Work New Construction	# Baths 3,5
Vance Johnson Plumbing Plumbing Contractor's Company Name	(910) 424-6712 Telephone
Po Box 64307, Fay, NC 28306 Address	etoepfer@vj.plumbing.com Email Address
NC 7756 License #	
Insulation Contractor Information	
A 1 Insulation	(910) 850-2157
Insulation Contractor's Company Name & Address	Telephone

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.

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	
Company or Name Floyd Properties and Development	
Sign w/Title Construction Coordinator Date 7/30/19	