

Application # 5FD19108 - 00091

* 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. Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

on on license.	
Owner's Name: S. Alan Pope and Rachel M. Pope	
Site Address: Fairground Rd., Coats, NC 2	7521 Phone: (
Subdivision: N/A	Lot:
Description of Proposed Work: Construction of SFD	
General Contractor Information	
Barefoot Building Company, LLC Building Contractor's Company Name	(913) 890 - 3256 Telephone
PO BOX 1411 , Coats , NC 27521 Address	Email Address
81627 License #	
Electrical Contractor Information	
Description of Work intallation of electrical Service Size:	
Wester + Pace Electric, Inc. Yitem	(919) 499-5389
Lieutrical Contractor's Company Name	Telephone
Coly Leslie Rd. Address	Email Address
<u>U.12007</u> License #	
Mechanical/HVAC Contractor Information	
Description of Work installation of HVAC syste	L PAL
T+M Heating + Ai- Condition Co. the Mechanical Contractor's Company Name	(90) 897-550) Telephone
724 Turlington Rd., Dunn, NC	
724 Turlington Rb., Dunn, NC Address 28334	Email Address
License #	
Plumbing Contractor Information	<u>n</u>
Description of Work installation of plumbly	# Baths
Plumbing Contractor's Company Name	
115 Keyman Drive, Coats, NC 27521	,
Address	Email Address
License #	
Insulation Contractor Information	
Stephens Building Products, LLC	919 - 630 - 8365
Insulation Contractor's Company Name & Address 1200 Composition Pkwy. Swite 121, Ro	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

8-/2-/9 Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
The disconstitute 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: Wall 12 13 Member - Manyor Date: 8-12-19	