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

Application for Residential Building and Trades Permit

phone must match	Date 9/6/19
Owner's Name / WERCON /NC	
Site Address	Men. Phone 910.717.5076
Directions to job site from Lillington NC	28356
	21
Subdivision Sweetwater	Lot
Description of Proposed Work New Kesidential	# of Bedrooms
Heated SF 2100 Unheated SF 415 Finished Bonus Room? N	Crawl Space Slab
gouage General Contractor Information	910-237-3461
Building Contractor's Company Name	Telephone
Po Box 64776	trouga vercon net Email Address
Acdress Acdress	Email Address
57917 / LTD License #	
Electrical Contractor Information	Amps I-Pole Yes No
	910 - 323 - 2458 Telephone
SANDY RIOCK FIRETRIC  Electrical Contractor's Company Name	Telephone
Address PD. FACETFULLER ALC Address 28312	Email Address ) Com
NC 11:29701	
License # Mechanical/HVAC Contractor Inform	ation
44	910-858-0000
Po Box 1071 Hape Mills, NC Address	Etrun. certificagmail.com Email Address
H3C1/200/2 License #/	
Plumbing Contractor Informatio	<u>n</u>
Description of Work A few Construction.	# Baths 72
LADRY LEKE RUPBING.	910-424-1766
Plumbing Contractor's Company Name	Telephone
7051 CREST ST. YASTENIUE NC 28306.	Email Address
Address	
License #	
Insulation Contractor Information	010 611 0000
Hour NSMADOW, SIA DED DAME STORE (LO	719 - 961 - 0979 Telephone
Insulation Contractor's Company Name & Address	Cophone

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 Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Owner \_\_\_\_\_ Officer/Agent of the Contractor or Owner General Contractor 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 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

GERGIORNI .

GAS CONTRACTOR.

FOR GAS LOG FIRE PLACE

DIVERSIFIED ENERGY

17220 US HWY 421 5. DUNN, NC 256334-8757

LICI # 31611 FP