

09/09/11

Application #

SFD1909-00316

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

Owner's Name FRANKIE HARANT Date 11-19-19

Site Address 111 Laurelale Lane, Dunn, N.C. Phone 919-894-7444

Directions to job site from Lillington Take 421 to Eason rd on Dunn Eason rd then left on Antioch ch Rd - Laurelale Ln. on left

Subdivision Lot

Description of Proposed Work New Home # of Bedrooms 3

Heated SF 1204 Unheated SF 494 Finished Bonus Room? NO Crawl Space Slab

General Contractor Information

FREEDOM Constectors Inc

910-892-1231

Building Contractor's Company Name

Telephone

PO Box 608 Dunn, NC 28335

Steve Jernigan55@outlook.com

Address 11590

Email Address

License #

Electrical Contractor Information

Description of Work WIRE New house Service Size 200 Amps T-Pole Yes No

Jason H Pope Electrical Contractors

919-820-0837

Electrical Contractor's Company Name

Telephone

81 Beaver Creek Dr, Dunn NC 28334

jhpel@earthlink.net

Address 27284-u

Email Address

License #

Mechanical/HVAC Contractor Information

Description of Work HVAC New House

J+M Heating + Air Inc

910-897-5501

Mechanical Contractor's Company Name

Telephone

724 Turlington Rd, Dunn, NC 28334

jandmhvac@centurylink.net

Address 17164

Email Address

License #

Plumbing Contractor Information

Description of Work PLUMB new house # Baths

Gilbert Plumbing Co

910-567-6361

Plumbing Contractor's Company Name

Telephone

1638 Timothy Rd, Dunn, NC 28334

gpcj@intrstar.net

Address 10929

Email Address

License #

Insulation Contractor Information

Insulating Inc 5902 Fayetteville Rd, Raleigh NC 919-772-9000

Insulation Contractor's Company Name & Address

Telephone

*NOTE General Contractor 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

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

11-19-19
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 Freedom Contractors

Sign w/Title Steve Jorgensen Director

Date 11-19-19