

Application # 501910-0023

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

on on license.	
Owner's Name: RONALD AND VIRGINIA WINES	Date: _/0/3///9_
Site Address: 263 Weaver Lave, SAN ford NC	27/332Phone:
Subdivision: Quai Creek FARMS  Description of Proposed Work: New Single Camily du  General Contractor Information	Lot: <u>23+24</u>
Description of Proposed Work: New Single Camily du	velling
General Contractor Information	U
Custom Contracting Corporation  Building Contractor's Company Name	7/9 - 1/75 - 1/9 / 7 Telephone
1504 S. Horner Blud, SANFORD, NO 27330	WANGROCE @ GROCE COMPANIE Email Address
Address	Email Address Con
8664	
License #	
Description of Work Wire house Service Size:	Amps T-Pole: Yes No
Billings Electric	919-258-31/5 Telephone
Elactrical Countractor's Company Name	Telephone
736 John Rosser Road Sanford NC 21330 Address	joshcf8d569@ hotmail.com Email Address
<u> /8798 – U</u> License #	
Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work	
Afford Able Heating and A/C Mechanical Contractor's Company Name	919-498-2791
Mechanical Contractor's Company Name	Telephone
P.O. BOX 326 LEMON SpRINGS, NC 28355	Telephone  high Tying 4x4@ amail. Com  Email Address
Address	Email Address
20046	
License # Plumbing Contractor Information	
, , , ,	7
Peliable Plumbing	919-275-5782
	- ' '
Plumbing Contractor's Company Name  1480 Zion Church Road, San Sord NC 27330  Address	reliable slumbing @ winds tream,
7/5/	7/61
License #	
Insulation Contractor Informatio	
B-Dranvized Insulation P.O. Box 164/20	919-615-3195
Insulation Contractor's Company Name & Address Columbus, 0H 43216	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 <a href="by-signing-below-I have obtained all subcontractors">by-signing-below-I have obtained all subcontractors</a> permission to obtain these permits and if <a href="mailto:any">any</a> 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

11-20-20/9 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: Date: 1/-20-2019	