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

onorie must materi	
Owner's Name Freedom Constructors	Date 11-5-19
Site Address 29 West or	Phone 19-868-5307
Directions to job site from Lillington 210 Toward Am	gier Sub on Bylt
Subdivision Planters Clen	Lot3 &
Description of Proposed Work New Home	# of Bedrooms
Heated SF 1710 Unheated SF 63 (Finished Bonus Room?	
General Contractor Information	
FREEDOM Constenctors Inc	90-892-1231
Building Contractor's Company Name	Telephone
Po Box 608 Dunn, NC 28335	Seve Tenic ans 8@ outlook. Com
Address	Email Address
License # Electrical Contractor Information	on /
Description of Work Wilt New Hon & Service Size	200 Amps T-Pole 1 Yes No
Tason of Pope Electrical Contractors	9/9-820-005/
Electrical Contractor's Company Name	Telephone
81 Beaver (reek Dr. Dunn NC 28334	in peletrical Chotual, COM Email Address
Address	Ellial Address
8 27284 - u	
License # Mechanical/HVAC Contractor Information	
Description of Work HVAC New House	
JAM Heating + Air Inc	910-897-5501
Mochanical Contractor & Company Name	Telephone
724 Turlington Pd, Dung, NC 28334	jand mhvac@conturylink.net
Address	Email Address
17164	
License # 1	on
	# Rathe
Degenption of the Land	Telephone apcile intrstar. ret Email Address
Plumbing Contractor's Company Name	Telephone
1638 Tinothy Rd, Dunn, NC 28334	apcile intristar. net
Address	Email Address
10929	
Lucinos #	ion
Insulation Contractor Information	919-772-9000
Insulating Inc 5902 Fagethville Pd Paleign	Telephone
Insulation Contractor's Company Name & Address	· · · · · · · · · · · · · · · · · · ·

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 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 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_

Sign w/Title

_____ Date _((-5-49