

Application #

Harnett County Central Permitting PO Box 65 Lillington, NC 27546

\* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed contractor. Address, company name & phone must match 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.	11 4
Owner's Name: Richard: Melanie Payne	Date: //- 9-20
Site Address: 218 will's Pope RZ Angien NC 27501 Phone:	
Subdivision:	Lot:
Description of Proposed Work: New Const	Total Job Cost: 350,000.00
General Contractor Information	
Sevenity Built Homes Inc. Building Contractor's Company Name	910-984-7042 910-893-2691
Building Contractor's Company Name	Telephone
PO BOX 1417 Cillington NC 27546	Klawrence @cap:talmaiblecreations.com
Address	Email Address
63787 HEATED SQ FT 2910 GARAGE	SQFT 504
Description of Work New Const.  Service Size State Sta	
Description of Work New Const. Service Size	ATION  ZA: 200 Amns T-Pole: Yes No
Makay's Floriand	919.1039-4837
Electrical Contractor's Company Name	Telephone
731 Mabry RZ Ansier NC 27501	, step.tette
Address	Email Address
150114	
License #	
Mechanical/HVAC Contractor Information	
Description of Work New Const.	
J, M.	910-897-5501
Mechanical Contractor's Company Name	Telephone
724 Turlington RZ Dunn NC 28334	
Address	Email Address
17164	
License #	4
Plumbing Contractor Informa	2
Description of Work New Const	# Baths
Jason Barefoot	910-892-4736
Plumbing Contractor's Company Name	Telephone
5476 Timothy RZ Dunn NC 28334	
Address	Email Address
20694P-1	
License #  Insulation Contractor Information	
Insulating Inc 5902 Fayettaille P2 Ralvighoc	919-772-9000
Insulation Contractor's Company Name & Address 2762	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="bysigning below!">by signing below!</a> have obtained all subcontractors permission to obtain these permits and if <a href="mainto: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.  $\iint -G -20$ 

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

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: Officer/Agent of the Contractor or Owner General Contractor 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: