

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 Floyd Properties and Development Date 1/15/20
Site Address 169 Education Dr Spring Lake 28390 Phone (910) 423-6700
Directions to job site from Lillington _____

Subdivision Anderson Creek Lot 1095
Description of Proposed Work New Construction # of Bedrooms 5
Heated SF 3592 Unheated SF 524 Finished Bonus Room? Yes Crawl Space Slab _____

General Contractor Information

Floyd Properties and Development (910) 423-6700
Building Contractor's Company Name Telephone
901 Arsenal Avenue, Fayetteville, NC 28305 jrichard6@nc.rr.com
Address Email Address
74172
License #

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes No
Buford Electric (910) 818-0994
Electrical Contractor's Company Name Telephone
2978 Gillespie Street, Fayetteville, NC 28306 bufordelectric@gmail.com
Address Email Address
31424-U
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Chacco, Inc. (910) 237-0779
Mechanical Contractor's Company Name Telephone
1910 Pamabea Drive, Fayetteville, NC 28301 chacco@embarqmail.com
Address Email Address
PH 2-3, 15108
License #

Plumbing Contractor Information

Description of Work New Construction # Baths 3.5
Vance Johnson Plumbing (910) 424-6712
Plumbing Contractor's Company Name Telephone
P.O. Box 64307, Fayetteville, NC 28306 eblanchard@vjplumbing.com
Address Email Address
NC 7756
License #

Insulation Contractor Information

A-1 Insulation - Po Box 180, Hope Mills, NC 28348 (910) 429-2990
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

Laura A Floyd
Signature of Owner/Contractor/Officer(s) of Corporation

1/15/20
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 Floyd Properties and Development Inc.

Sign w/Title Laura A Floyd Assistant Construction Coordinator Date 1/15/20