

09/09/11

Application #

SFD 2003-0015

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 Lamco Homes Date _____

Site Address Lot 47, Kotata Ave Phone 919-307-4254

Directions to job site from Lillington FOLLOW E. Front St. & Lot St. to E. McNeill St.
Take Ross Rd to Bramble Ave. in Bunnlevel cont. on
Bramble Ave. to Kotata Ave.

Subdivision Blackberry Manor Lot 47

Description of Proposed Work New Home Construction # of Bedrooms 3

Heated SF 1801 Unheated SF 420 Finished Bonus Room? _____ Crawl Space _____ Slab

General Contractor Information

Lamco Homes 919-307-4254
Building Contractor s Company Name Telephone
7424 Chapel Hill Rd Ste 203, Raleigh NC 27607 info@lamcohomes.com
Address Email Address
59567
License #

Electrical Contractor Information

Description of Work New Electrical Service Size _____ Amps T-Pole Yes _____ No
On Time Services _____
Electrical Contractor s Company Name Telephone _____
1140 NC 55 E, Coats NC 27521 _____
Address Email Address
24450-L
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction HVAC
Total Systems Heating and Cooling, Inc 910-436-3450
Mechanical Contractor s Company Name Telephone
13341 NC HWY 210 S, Spring Lake NC 28390 parts@totalsystemsnc.com
Address Email Address
28846
License #

Plumbing Contractor Information

Description of Work New Construction # Baths 2
Donnie Avery Plumbing Co 919-639-2023
Plumbing Contractor s Company Name Telephone
3221 C Plainview Church Rd, Angier NC 27501 _____
Address Email Address
10886-P
License #

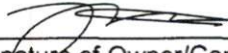
Insulation Contractor Information

Tri-City Insulation, 7204 Becky Circle, Raleigh NC 919-369-4730
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


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

3-6-20
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

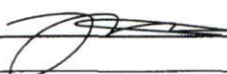
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 Lamco Homes

Sign w/Title  Tony Toro, VP of Construction Date _____