



Application # SFD2003-0022

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

Owner's Name: RYKES GROUP INC Date: 2-27-20
Site Address: 55 DON RON RD. Phone: 910 322 4525
Subdivision: _____ Lot: _____
Description of Proposed Work: SPRC HOME Total Job Cost: 140K

General Contractor Information

Danny Ray Fisher 910 890 1504
Building Contractor's Company Name Telephone
604 WOODSTOWN DR. ERWIN, NC 28339 dfisher769@yahoo.com
Address Email Address
72543
License #

Electrical Contractor Information

Description of Work NEW ELEC INSTALL Service Size: 200 Amps T-Pole: Yes No
JASON H. BOE Elec. Contractors LLC 919 870 0837
Electrical Contractor's Company Name Telephone
81 BEAVER CREEK DR. DUNN NC 28334 Jhpelectric@hotmail.com
Address Email Address
27284
License #

Mechanical/HVAC Contractor Information

Description of Work NEW HVAC INSTALL Lic# not active
RANDY LEE JACKSON 910-242-2941 cannot find
Mechanical Contractor's Company Name Telephone this
100N 13th St. Suite 15W Erwin NC 28339 contractor
Address Email Address w/ this lic#
H-3-1# 18515 K.G.
License #

Plumbing Contractor Information

Description of Work NEW PLUMBING INSTALL # Baths 2
GLOVER PLUMBING INC. 919 868 0959
Plumbing Contractor's Company Name Telephone
304 Quail hollow Sanford NC 27333 gloverplumbinginc@rocketmail.com
Address Email Address
23160
License #

Insulation Contractor Information

Palomo 910-237-9446
Insulation Contractor's Company Name & Address Telephone

*NOTE: General Contractor / owner 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

2-27-20

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.

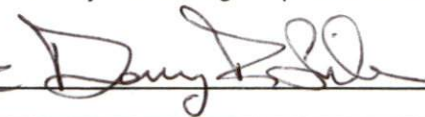
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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.

Sign w/Title:

OWNER 

Date:

2-27-20