

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 information on license.

Application for Residential Building and Trades Permit

Owner's Name: Wellons Realty	Date: 5/5/2020	
Site Address: 147 Wheat Drive, Angier, NC 27501	Phone:	910-892-3123
Subdivision: Planter's Glen	Lot: <u>3</u> 1	
Description of Proposed Work: New SFD	_ Total Job Cost:	
General Contractor Information	_	
Robert Paul Wellons	910-892-3123	3
Building Contractor's Company Name	Telephone	
PO Box 730, Dunn, NC 28335-0730	laurenwhite@wellonsrealty.com	
Address	Email Address	
7746		
License #		
Description of Work New SFD Wiring Electrical Contractor Information Service Size: 2		ole: _xYesNo
Jason H Pope Electrical Contractors	919-820-0837	
Electrical Contractor's Company Name	Telephone	
81 Beaver Creek Dr. Dunn, NC 28334	jhpelectrical@hotmail.com	
Address	Email Address	
27284-U		
License #		
Mechanical/HVAC Contractor Informa	<u>ation</u>	
Description of Work New SFD Mechanical	_	
J & M Heating and Air Conditioning	910-897-5501	
Mechanical Contractor's Company Name	Telephone	
724 Turlington Rd. Dunn, NC 28334	jandmhvac@centurylink.net	
Address L.17164	Email Address	
License #		
Plumbing Contractor Information	1	
Description of Work Plumb new SFD	# Baths 2	
Wagner Plumbing	910-890-2299	
Plumbing Contractor's Company Name	Telephone	
55 Tirzah Dr. Lillington, NC 27546	•	
Address	Email Address	
L.31576		
License #		
Insulation Contractor Information	_	_
Tri City Insulation 334 East Mountain Dr., Fayetteville NC	910-486-885	_
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.

Timothy W. Tart Signature of Owner/Contractor/Officer(s) of Corporation 5/5/2020 Date		
Signature of Owner/Contractor/Officer(s) of Corporation Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14		
The undersigned applicant being the:		
X General Contractor Owner 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:		
X 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.		
X 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: Timothy W. Tart Estimating Mgr Date: 5/5/2020		