

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: GLOVER Plumbing Shawn Glover Date: 3-6-20
 Site Address: 630 Iris Bryant Rd Dunn NC 28334 Phone: 919 868 0959
 Subdivision: _____ Lot: # 7
 Description of Proposed Work: Spec Hom. Total Job Cost: 150K

General Contractor Information

Danny R. Fisher 910 890 1504
 Building Contractor's Company Name Telephone
604 WOODBURN DR. ERWIN, NC 28339 dfisherbg@yahoo.com
 Address Email Address
27543 72543
 License #

Electrical Contractor Information

Description of Work NEW Elec Install Service Size: 200 Amps T-Pole: Yes No
Jason H. Pope Electrical Contractors LLC 919 820 0837
 Electrical Contractor's Company Name Telephone
81 BEAVER CREEK DR. DUNN NC 28334 Jhp_electrical@hotmail.com
 Address Email Address
27284
 License #

Mechanical/HVAC Contractor Information

Description of Work NEW HVAC Install
FRANCY LEE JACKSON
 Mechanical Contractor's Company Name Telephone
100 N 13th St. SUITE 15W ERWIN, NC 28339
 Address Email Address
H-3-1# 18515 18512
 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 gloverplumbing@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.

[Handwritten Signature]

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.

Sign w/Title: Fisher Bldg Corp LLC *[Signature]*

Date: 3-6-20