Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits

Application for Residential Building and Trades Permit

Owners Name Floyd Properties and Development	Date
Site Address 141 Education Drive, Spring Lake, Nr. 25	8390 Phone (910) 423-6700
Directions to job site from Lillington	
Subdivision Anderson Creek	Lot 1097
Description of Proposed Work New Construction	# of Bedrooms5
Heated SF 3329 Unheated SF 46 Finished Bonus Room?	Crawl Space ✓ Slab
	(910) 423-6700
Floyd Properties and Development Building Contractor's Company Name	Telephone
901 Arsenal Avenue, Fagetteville, NC 28305 Address	Email Address
74172_ License #	
Electrical Contractor Information	Zoo Amps T-Pole / Ves No
Description of Work New Construction Service Size	
Buford Electric Electrical Contractor's Company Name	(910) \$18 - 0994 Telephone
2978 Gillespie Street, Fayetteville, NC 28306 Address	butomelectric@gmail.com Email Address
31424-0	
License # Mechanical/HVAC Contractor Inform	ation
Description of Work New Construction	and the second s
	(910) 237-0779
Mechanical Contractor's Company Name	Telephone
1910 Pamabee Drive, Fayetteville, NC 28301 Address	Chacco @embarqmgil.com Email Address
PH 2-3, 15108	
License #	2
Plumbing Contractor Information	# Baths 4,5
Description of Work New Construction	
Plumbing Contractor's Company Name	(910) 424-6712 Telephone
P.O. DOX 64307, Fayetteville, NC 28306	e blanchard a viplumbing. com Email Address
Address	Email Address
NC 7756	
License # Insulation Contractor Information	n
	(910) 429-2990
A-1 Insulation - Po Box 180, Hope Mills, NC 28348 Insulation Contractor's Company Name & Address	Telephone

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 5/12/20 Signature of Owner/Contractor/Officer(s) of Corporation 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 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

Company or Name Floyd Properties and Development

Sign W/Title Januar Richard/Construction Coordinator Date 5/12/20

carrying out the work