

* 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. 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

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Owner's Name: Raynor Builders Inc.	Date: 6 - 8 - 2020
Owner's Name: Kaynor Builders Inc., Site Address: 156 E. Main Street Couts /V.C. 2752 Subdivision: //A	Phone: 919-639-2011 ext 109
Description of Proposed Work: New single Family Dwelling	Total Job Cost: 9/150000,00
General Contractor Information	
Building Contractor's Company Name	919-639-2011 ext /09 Telephone
725 N. Raleigh Street Angier, 110,27501	anorris, rhiegnal, com
Address	Email Address
40079	
License #	
Electrical Contractor Informatio	n .
	ZOO Amps T-Pole: Yes No
Mabry Electrical Service 210, Electrical Contractor's Company Name	919-639-4837 Telephone
Electrical Contractor's Company Name	Telephone
731 Mabry Road Angier, NC 27501	Email Address Mabry electrica 1,001
Address	Email Address
15077- U License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work Install new HVAC system in n	
Stanherm Hactingad Air	919-329-0686
5tephenson Heating and Air Mechanical Contractor's Company Name	Telephone
343 Shipwash Drive Garner, N.C. 27529	stephenson huac Daol. com
Address	Email Address
18644	
License #	
Plumbing Contractor Information	
Description of Work Planting of new house	#Baths 2
1.) agree Olymbias	919-178-1537
Plumbing Contractor's Company Name	9/9-228-/532 Telephone
555 Tirzah Delve Lillington NC. 27546	Wagner plumbing Co Dyahoo, com Email Address
Address	Email Address
31576	
License #	
Insulation Contractor Information	
Insulation Contractor's Company Name & Address 27529 Telephone	
Insulation Contractor's Company Name & Address 27529	Telephone
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*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.

6-8-2020

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Signature of Owner/Contractor/Offiger(s) of Corporation 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: Date: 6-8-2020