



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: Henry Smith Date: 6-3-20
Site Address: 167 Brandon Drive Lillington NC 27546 Phone: 910-818-9609
Subdivision: Keith Hills Lot: 9
Description of Proposed Work: NEW HOUSE Total Job Cost: 400000.00

General Contractor Information

HAYWOOD BUILDERS INC. 910-237-0532
Building Contractor's Company Name Telephone
2301 FURLOW PL. EASTOVER N.C. 28312 haywoodbuildersinc@ymail.com
Address Email Address
58586 BLB-U
License #

Electrical Contractor Information

Description of Work NEW HOUSE Service Size: 200 Amps T-Pole: Yes No
B & M ELECTRIC LLC 910-818-3566
Electrical Contractor's Company Name Telephone
1726 SONCER DR EASTOVER N.C. 28312
Address Email Address
06423 EL-U
License #

Mechanical/HVAC Contractor Information

Description of Work NEW HOUSE
FOUST HEATING & AIR COND. INC 910-323-0587
Mechanical Contractor's Company Name Telephone
2976 PUNN RD foustheatingandair@nc.rr.com
Address Email Address
17439 H231
License #

Plumbing Contractor Information

Description of Work NEW HOUSE # Baths 3
ALLEN'S PLUMBING COMPANY 910-531-2002
Plumbing Contractor's Company Name Telephone
4193 BEAVER DAM CHURCH R.D. ROSK BORO N.C. 28382
Address Email Address
9493 PH-3
License #

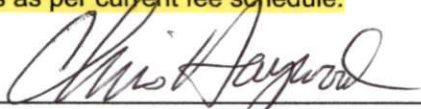
Insulation Contractor Information

COMPELLANO INSULATION 910-484-7118
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

6-8-2020

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: Chris Hayward CHIEF HARNETT PRES Date: 6-8-2020