

Application # ____

* 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

on on idense.	1 -				
Owner's Name: Archy D Weez	Date: 8/14/7020				
Site Address: 105 Stage Looch LN Locats	NC Phone: 919/085938				
Subdivision;	Lot: #1 Stephenson welson ween				
Description of Proposed Work: New Home Construction					
General Contractor Information					
Building Contractor's Company Name	919 608 5938				
^	relephone				
Address	Email Address				
License #					
Electrical Contractor Information	1				
Description of Work New Home con struct Bervice Size:	Amps T-Pole: Yes No				
BYR Electric/IC Electrical Contractor's Company Name	919 723-5154 Telephone				
7434 Capital BlvD Raleyh NC 27616	Email Address				
7.5.27.8 License #					
Mechanical/HVAC Contractor Information					
Description of Work New Harve Construction					
Brown Brothers plumbing Heating Mechanical Contractor's Company Name	919 220 - 2554 Telephone				
Address	E				
1623 COZ82 License #	Email Address				
License # Plumbing Contractor Information					
Description of Work New Home Construction	# Baths3				
Brown Brothers Plumbing + Heating Plumbing Contractor's Company Name	919-220-2554				
2 2 2 2 4 Cloles 2 Leave AIC 2 22 2 4	Telephone				
DOBOXISGES DUMANINCZ7704	Email Address				
License # 00282					
Insulation Contractor Information					
Insulation Contractor's Company Name & Address Tay Heulle uc Cicase 9818	910 - 483 - 1346 Telephone				
*NOTE: General Contractor / owner must fill out and sign the second page of this application.					

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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.

Date

Signature of Owner/Contractor/Officer(s) of Corporation

8/14/2020

The unders	Affidavit signed applicant being		Compensation N.	C.G.S. 87-14
Ge	eneral Contractor _	Owner	Officer/Agent of	the Contractor or Owner
	confirm under penaltie the permit:	es of perjury that th	ne person(s), firm(s) or	corporation(s) performing the work
Has	three (3) or more em	ployees and has o	btained workers' comp	ensation insurance to cover them.
them.				compensation insurance to cover workers' compensation insurance
covering th	nemselves.			The state of the s
Has	no more than two (2)	employees and no	o subcontractors.	
Department to issuance	nt issuing the permit m	nay require certifica	ates of coverage of wor	od that the Central Permitting ricker's compensation insurance prior any person, firm or corporation
Sign w/Title	e: ////	4	aine v	Date: 811412020