



Harnett COUNTY NORTH CAROLINA

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: Keith Weatherly Date: 9-1-20
Site Address: 4411 Old Stage Rd N Phone: 919-819-2673
Subdivision: None Lot: _____
Description of Proposed Work: New Apt. Garage Total Job Cost: \$50,000

General Contractor Information

owner
Building Contractor's Company Name _____ Telephone 919-819-2673
4411 Old Stage Rd. N. Angier Address _____ Email Address LKeithWeatherly@gmail.com
License # _____

Electrical Contractor Information

Description of Work New construction Service Size: 200 Amps T-Pole: Yes No
Diversified Power Solutions Telephone 919-817-9947
Electrical Contractor's Company Name _____
4332 Rockside Hills Dr. Raleigh 27603 Address _____ Email Address ray@installectric.com
254770 License # _____

Mechanical/HVAC Contractor Information

Description of Work New S/S HP & duct
Apex Heating & Air Telephone 919-467-8823
Mechanical Contractor's Company Name _____
1231 Perry Rd. Suite 106 Apex 27502 Address _____ Email Address kenny@apexheatingandair.com
13755 License # _____

Plumbing Contractor Information

Description of Work Basic Plumbing Inc # Baths 1
Basic Plumbing, Inc Telephone 919-662-1082
Plumbing Contractor's Company Name _____
1409 Mechanical Blvd. Garner 27529 Address _____ Email Address service@basicplumbinginc.com
L05100 License # _____

Insulation Contractor Information

Insulating Inc. 5902 Fayetteville Rd. 27603 Telephone 919-772-9000
Insulation Contractor's Company Name & Address _____

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

strong roots • new growth



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

9-1-20
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: *[Signature]* Date: 9-1-20