

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: RP Wellons & Development LLC	Date: 9/23/2020
Site Address: Lot 3 – PIN: 1515-83-5363.000 = 1380 Pope Rd, DU	NN, NC Phone: 910-892-3123
Subdivision: LONG BRANCH HOLDING CO	Lot: <u>3</u>
Description of Proposed Work: NEW SFD	Total Job Cost: 315,000
General Contractor Informa	
Robert Paul Wellons	910-892-3123
Building Contractor's Company Name	Telephone
PO Box 730, Dunn, NC 28335-0730	laurenwhite@wellonsrealty.com
Address	Email Address
7746 HEATED SQ FT 2778 GARAGI	ESQFT 581
License #	
Description of Work Wire New SFD Electrical Contractor Inform Service Si	
Jason H Pope Electrical Contractors	ze: <u>200</u> Amps T-Pole: <u>X</u> Yes <u>No</u> No 919-820-0837
Electrical Contractor's Company Name 81 Beaver Creek Dr. Dunn, NC 28334	Telephone jhpelectrical@hotmail.com
Address	Email Address
27284-U	Email Address
License #	
Mechanical/HVAC Contractor Inf	formation
Description of Work New SFD Mechanical	
J & M Heating and Air Condition Co Inc	910-897-5501
Mechanical Contractor's Company Name	Telephone
724 Turlington Rd. Dunn, NC 28334	jandmhvac@centurylink.net
Address	Email Address
L.17164	
License #	
Plumbing Contractor Inform	<u>ation</u>
Description of Work Plumb new SFD	# Baths <u> 3</u>
MLS Plumbing Co. Inc	910-484-1124
Plumbing Contractor's Company Name	Telephone
1500 Gillespie St, Fayetteville, NC	mlsplumbing@hotmail.com
Address	Email Address
L.28833	
License #	-W
Insulation Contractor Information Application Inc. 5002 Fevetteville Ed. Releigh, NC. 910, 772, 0000	
Insulating Inc 5902 Fayetteville Rd, Raleigh, NC	919-772-9000
Insulation Contractor's Company Name & Address	Telephone

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



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.

Timothy W. Tart Signature of Owner/Contractor/Officer(s) of Corporation	9/23/2020	
Signature of Owner/Contractor/Officer(s) of Corporation Date		
Affidavit for Worker's Comper The undersigned applicant being the:	nsation N.C.G.S. 87-14	
General Contractor Owner _X Off	ficer/Agent of the Contractor or Owner	
Do hereby confirm under penalties of perjury that the person set forth in the permit:	(s), firm(s) or corporation(s) performing the work	
X Has three (3) or more employees and has obtained w	orkers' compensation insurance to cover them.	
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.		
\underline{X} 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 subcontr	ractors.	
While working on the project for which this permit is sought it Department issuing the permit may require certificates of covto issuance of the permit and at any time during the permitted carrying out the work.	verage of worker's compensation insurance prior	
Sign w/Title: Timothy M. Tart	Date: 9/23/2020	
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