



Application # SFD-2010 - 0102

\* 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. 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**

	1.11 100 1		
O	wner's Name: ABJ Investments	Date:	
Sit	ite Address: 81 Hazclwood Rd	Phone: 910~ 401-5505	
Su	ubdivision: <u>South Circle</u>	Lot: <u> </u>	
De	escription of Proposed Work:	_ Total Job Cost:	
	General Contractor Information		
10	gay Robinson Homes	919-401-5505	
Bi	Gay Robinson Homes  uilding Contractor's Company Name  200 Ramsay St Ste 200 Fayetteville NC  ddress  22311	Telephone	
le	200 Ramscy St Stp 200 Fametheville NC	rnonda.arhomes@amail	
Ac	ddress J 29311	Email Address	
	HEATED SQ FT GARAGE SC	QFT	
Lic	cense#		
/De	escription of Work Service Size: _	Amps T-Pole: Yes No	
/ 3	HP Electrical Contractors	9191-820-0837	
Ele	ectrical Contractor's Company Name	Telephone	
8	1 Beaver Creek Dr Dunn NC 28334	Jason@ Jasonh popee lectrica	
Ac	ddress	Émail Address	
2	-7284 U		
LIC	cense #  Mechanical/HVAC Contractor Inform	ation	
De	escription of Work	duon	
De	escription of thork		
Me	echanical Contractor's Company Name	Telephone	
6.01.	osmanios osmipanij name	relephone	
Ac	ddress	Email Address	
Lic	cense #		
Plumbing Contractor Information			
De	escription of Work	_# Baths	
_			
Pli	umbing Contractor's Company Name	Telephone	
	ddress	Frank Address	
AC	uui ess	Email Address	
Lic	cense #		
	Insulation Contractor Information	<u>n</u>	
Ins	sulation Contractor's Company Name & Address	Telephone	



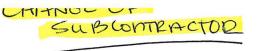
I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above 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.

H [28 [2]

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:			





Application # SFD- 2010 - 0103

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910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

Owner's Name: ABJ INVESTMENTS	Date: 4/28/2/				
Site Address: 58 Heath Dr	Phone: Q10 - 40 + 5505				
Site Address: 58 Heath Dr Subdivision: South Crep K	Lot: 44				
Description of Proposed Work:					
General Contractor Inform					
	910-401-5505				
Gan Robinson Human Building Contractor's Company Name	Telephone				
6200 Ramsoy St Ste200 Faye Hevile NC Address Z8311	rhonda grhomes Ogmai. Email Address				
HEATED SQ FT GARAG	GE SQ FT				
License # Electrical Contractor Inform	mation				
Description of Work Electrical on New Service	Size:Amps T-Pole:YesNo				
JHP Electrical Contractors CLC Electrical Contractor's Company Name	919-820-0837				
8) Blaver Creek Dr Dunn NC Address 28334	Jasona Jasonh pope electr				
Address 28334	Email Address				
27284 U License #					
Mechanical/HVAC Contractor I	nformation				
Description of Work					
Mechanical Contractor's Company Name	Telephone				
Address	Email Address				
Address	Linaii Address				
License #					
Plumbing Contractor Information					
Description of Work	# Baths				
District Control of the Control of t					
Plumbing Contractor's Company Name	Telephone				
Address	Email Address				
License #					
Insulation Contractor Information					
Insulation Contractor's Company Name & Address	Telephone				
Traine a Mario	rolophono				

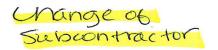


I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above 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.

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:				





Application # <u>SFD-2010-00</u>99

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## **Application for Residential Building and Trades Permit**

Owner's Name: (AB) Investments	
Site Address: 59 Indiao St	Phone: 910-4α۲-5505
Site Address: 59 Indigo St Subdivision: South Creek	Lot: 55
Description of Proposed Work:	
General Contractor Info	
Gary Robinson Homes	910-401-5505
Building Contractor's Company Name	Telephone
6200 Ramsey St Ste 200 Fayetteville M Address	Telephone  Monda-grhomes@gmail.  Email Address
HEATED SQ FT GAR	AGE SQ FT
License #	
Description of Work Now SFD Electrical Contractor Info	e Size: Amps T-Pole: Yes No
JHP Electrical Contractors LLC	
Electrical Contractor's Company Name	Telephone
& Beaucrace K Dr Dunn NC 28534 Address	,
27284 U	Email Address
License #	
Mechanical/HVAC Contracto	r Information
Description of Work	
Mechanical Contractor's Company Name	Telephone
* *	
Address	Email Address
License #	
Plumbing Contractor Info	
Flumbing Contractor into	<u>ormation</u>
Description of Work	
Description of Work	
Plumbing Contractor's Company Name	# Baths
Description of Work	# Baths
Plumbing Contractor's Company Name  Address	# Baths
Plumbing Contractor's Company Name	# Baths Telephone Email Address
Plumbing Contractor's Company Name  Address  License #	# Baths Telephone Email Address
Plumbing Contractor's Company Name  Address  License #	# Baths Telephone Email Address



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 <a href="by-signing-below-I have obtained all subcontractors">by-signing-below-I have obtained all subcontractors</a> <a href="permission-to-obtain-these-permits">permission to-obtain these-permits</a> and if <a href="any-changes">any-changes</a> 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.

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Signature of Owner/Contractor/Officer(s) of Corporation  Ulumber Of Corporation  Output  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				
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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.				
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Sign w/Title: Date:				



Change 1 Subwrite

Application # 5FD 2010 - 0100

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910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

Owner's Name A Da I las res tonges to	D-4
Owner's Name: ADJ Investments	
Site Address: 129 Munder Valley Ct.	Phone: 910-401-5503
Subdivision: South Croek	Lot:13
Description of Proposed Work:	Total Job Cost:
General Contractor Info  Gavy Robusson Homes  Building Contractor's Company Name	
Building Contractor's Company Name	Telephone
6200 Ramsey St Ste 200 Fayetteville Address 29311	M rhonda.grnomesegme Email Address .com
HEATED SQ FT GAR	AGE SQ FT
License#	annua di an
Description of Work Service	e Size: Amps T-Pole: Yes No
<u>JHP Electrical Contractors UU</u> Electrical Contractor's Company Name	
RL Beauer Creek Dr Dunn NC 2832 Address	34 Jason Dasonh none, eledti
Address	Email Address
27284 U	
License #	
Mechanical/HVAC Contractor	<u>r Information</u>
Description of Work	
Mechanical Contractor's Company Name	Telephone
	=
Address	Email Address
Lieuwa #	
License # Plumbing Contractor Info	ormation
Description of Work	# Baths
Diversing Contractorio Common Nove	Talankana
Plumbing Contractor's Company Name	Telephone
Address	Email Address
<del></del>	
License #	ormation
Insulation Contractor Info	<u>ormanon</u>
Insulation Contractor's Company Name & Address	Tolonhono
modiation Contractor's Company Maine & Address	Telephone



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Sign w/Title: Date:				