

strong roots • new growth

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



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

Application for Residential Building and Trades Permit

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.

Owner's Name: Cumberland Farms, Inc

Site Address: Joseph Alexander Dr. Fuquay, NC

Subdivision: Ballant Woods

Description of Proposed Work: NSF Dwelling

General Contractor Information

Building Contractor's Company Name: Cumberland Farms, Inc.

Address: P.O. Box 727 Dunn, NC 28535

Telephone: 910-892-4345

Email Address: NORTH'S BUILDING GROUP INC. nort@bkgp.com

License # 59493

Electrical Contractor Information

Description of Work: NSF Dwelling

Electrical Contractor's Company Name: JB Allen Electric Service

Address: 5810 BROWN HAVEN ROAD BROWN NC

Telephone: 919-232-1928

Email Address: N/A

License # 28206

Mechanical/HVAC Contractor Information

Description of Work: NSF Dwelling

Mechanical Contractor's Company Name: Stephenson's Heating & Air

Address: 343 Shipwash Dr., Garner, NC

Telephone: 919-329-0686

Email Address: _____

License # 18644

Plumbing Contractor Information

Description of Work: NSF Dwelling

Plumbing Contractor's Company Name: Davo Baker Plumbing

Address: 2425 NC Hwy 39, Zebulon NC

Telephone: 919-422-5520

Baths: ---

Plumbing Contractor Information

Description of Work: NSF Dwelling

Insulation Contractor's Company Name: Tatum Insulating

Address: _____

Telephone: 919-661-0999



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.

Dennis Rowley

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

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:

Dennis Rowley (Agent)

Date: