



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* 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: Maria & Randolph Snedeker Date 6/23/21
Site Address: 220 Pylant Tree Ln Fuquayvarina NC Phone 510-673-5697
Subdivision: _____ Lot _____
Description of Proposed Work: New Construction Single Dwelling Total Job Cost \$ 309,630.35

General Contractor Information

Schumacher Homes. 919-701-5674
Building Contractor's Company Name Telephone
152 W Hamlin Rd. Blaegle@schumacherhomes.com
Address Email Address
58362. **HEATED SQ FT 1716** **GARAGE SQ FT 484**
License #

Electrical Contractor Information

Description of Work Electric Service Size: 200 Amps T-Pole: Yes ___ No
Arguino Electric 919-264-8287
Electrical Contractor's Company Name Telephone
4424 River Edge rd Raleigh NC ArguinoElectric@gmail.com
Address Email Address
29-1384
License #

Mechanical/HVAC Contractor Information

Description of Work Hvac
Ultimate Comfort. 919-803-3544
Mechanical Contractor's Company Name Telephone
1508 S Saunders St. Raleigh NC UltimateComfortHvac@gmail.com
Address Email Address
30531
License #

Plumbing Contractor Information

Description of Work Plumbing. # Baths 2
A+R Plumbing. 919-609-3650
Plumbing Contractor's Company Name Telephone
224 Clearwater dr, Smithfield NC loriana4yo@hotmail.com.
Address Email Address
34300
License #

Insulation Contractor Information

Insulating Inc. 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.**

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 of Owner/Contractor/Officer(s) of Corporation

6/23/21
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:  Customer Coordinator. Date: 6/23/21