

Application # SFD2102-0115

* 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

tion on license.	
Owner's Name: Ray and Christina Hyn	Date: 28Feb 2021 Cameron ME. Phone: 910-257-0543
Site Address: 560 Needmore Road	Cameron ME. Phone: 910-257-0543
Subdivision:	Lot:
Description of Proposed Work: Build a hours	Total Job Cost \$33,000
General Contract	or Information
Building Contractor's Company Name	910-584-9209
Building Contractor's Company Name	Telephone
553 Porter Road Hope Mills N.C.	Email Address
Address	Email Address
55076 HEATED SQ FT 2300	GARAGE SQ FT 630
Electrical Contrac	tor Information
Description of Work Electrical	Service Size: 200 Amps T-Pole: YesNo
Aruss Electric	410-248-6068
Electrical Contractor's Company Name	Telephone
115 Arbor drive Raeford MC	
L-18248	Email Address
License #	
Mechanical/HVAC Con	tractor Information
Description of Work Heating and Air In	
Mechanical Contractor's Company Name	910-5028914
Mechanical Contractor's Company Name	Telephone
914 Coldwater dy Faretteville M	I rayshvac@g mail.com Email Address
Address	Email Address
32712	
License #	to unformation
Description of Work Phinting Tustall	_
To Plumbing	# Baths
Plumbing Contractor's Company Name	910-977-67623
1031 KINGS (& D. O Frank Make)	Telephone
1031 Kings Ley Pol Fuzettaille Mc.	Frail Address
L-18909	Linaii Address
License #	
C I I AT I Insulation Contract	
Cumberland Insulation 405 Clinton Rel Fage	Hersenc 910-484-7118
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 bermission 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

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: Date: 28Fcb2021	