

Application #\_

\* 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**

	Date: 2-23-2021
Site Address: 530 Pope Lake Rd., Angier, NC 2750	Phone: 919 - 920 - 3379
	Lot:/A
Description of Proposed Work: Construction of new SFD	Total Job Cost: 15 493, 132. °=
General Contractor Information	
Barefoot Building Company, L.L.C.	910-890-3256
Building Contractor's Company Name	Telephone
P.O. BOX 1411, Coats, NC 27521 Address	Email Address
81627 HEATED SQ FT 3926 GARAGE SC	,
License #  Electrical Contractor Information	
Description of Work installation of electrical system Service Size:	
Wester + Pace Electric, Inc.	(919) 499-5389
Electrical Contractor's Company Name	Telephone
614 Leslie Rd., Sanford, NC	Farail Address
Address U. 12007	Email Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work installation of HVAC system	
J+M Heating + Air Condition Co. Inc.  Mechanical Contractor's Company Name	(910) 897-5501
	Telephoné
724 Turlington Rd. Dunn, NC 28334	E
Address L. 17164	Email Address
License #	
Plumbing Contractor Information	
Description of Work installation of plumbly system	# Baths 3 / 2
Fred Arthur Chris hecuyer III	(910) 676-1925 /(919)-894-727
Plumbing Contractor's Company Name	Telephone
115 Keyman Drive, Coats, NC 27521	-
Address L. 30173	Email Address
License #	
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	919-630-8365
	Telephone
1200 Corporation Pkury. Suite 121, Raleigh, NC 27610	
*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.

2-23-2021 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:	