

Application #		
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* Each section below to be filled out by whomever performing work. Must be owner/occupier or ficensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

or, Address, company phone must match ion on license.	Application for Residential Building and	Trades Permit
Owner's Name: Cavil	ness & Cates Builidng and Development	CoDate: 3 11 2
Site Address: 309	Klosington Drive	Phone: (910)778-7902
Subdivision: Anderson	Creek Club/Anderson Creek Crossing	Lot: 181
	d Work: _new single family dwelling	- · · · · · · · · · · · · · · · · · · ·
Description of Propose	General Contractor Information	
		(910) 778-7902
Caviness & Cates Buildi Building Contractor's C	ng and Development Company Company Name	Telephone
639 Executive Place Ste	400 Fayetteville, NC 28305	pam@cavinessandcates.com
Address		Email Address
59586	HEATED SO FT 2 GARAGE	so F11 438
License #	Electrical Contractor Informa	
Description of Work n	ew residential/new system Service Size	ze: 200 Amps T-Pole: X Yes N
Tarheel Pride Electric C	Corp	(910) 303-2334 Telephone
Electrical Contractor's	Company Name	
PO BOX 458 Stedman, NC		thpelectric02@yahoo.com Email Address
Address		Littali Address
22985-L	<u> </u>	
License #	Mechanical/HVAC Contractor Info	ormation
Description of Mark I	new residential/new system	
Carolina Comfor Air		(910) 339-2374
Mechanical Contractor	's Company Name	Telephone
		rebecca@carolinacomfortair.com
PO Box 699 Dunn, NO Address		Email Address
29077		
License #		
	Plumbing Contractor Informa	ation
Description of Work no	ew residential/new system	# Baths
Vance Johnson Plumbi	ng	(910) 424-6712
Plumbing Contractor's	Company Name	Telephone
3242 Midpine Drive Fayetteville, NC		eblanchard@vjplumbing.com
Address		Email Address
7756-PL	_	
License #	Landada - Oduarda - Informa	ation
	Insulation Contractor Informa	
	n 4205 Clinton Road Fayetteville, NC 28312	(910) 484-7118 Telephone
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

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
x General Contractor x 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.
$\frac{x}{\text{covering themselves}}$. Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance
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: \(\text{\text{TCL ORESIGN}} \)