

Application #

Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* 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.

or. Address, company ohone must match on on license.	Application for Residential Building and Trades Permit		
	iness & Cates Builidng and Development	Co Date: 3/1/2/	
Site Address: 32	1 Kensington Drive	Phone: (910)778-7902	
Subdivision: Anderso	n Creek Club/Anderson Creek Crossing	Lot: 182	
	ed Work: _new single family dwelling	Total Job Cost 33,00	
	General Contractor Informa	ation	
Caviness & Cates Build Building Contractor's	ling and Development Company Company Name	(910) 778-7902 Telephone	
639 Executive Place St. Address	e 400 Fayetteville. NC 28305	pam@cavinessandcates.com Email Address	
59586	HEATED SO FT 2355 GARAGE	ESOFT 474	
License #	51 44 10 4 4 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	-41	
Description of Work	<u>Electrical Contractor Inform</u> new residential/new system Service Si	ize: 200 Amps T-Pole: X Yes N	
		(910) 303-2334	
Tarheel Pride Electric Electrical Contractor's		Telephone	
PO BOX 458 Stedman		thpelectric02@yahoo.com	
Address	i, NC	Email Address	
22985-L License #			
2.00.1.00 1.	Mechanical/HVAC Contractor Int	formation	
Description of Work	new residential/new system		
Carolina Comfor Air		(910) 339-2374	
Mechanical Contracto	r's Company Name	Telephone	
		rebecca@carolinacomfortair.com	
PO Box 699 Dunn, No Address	9	Email Address	
29077			
License #			
Litaria ir	Plumbing Contractor Inform	ation .	
Description of Work n	iew residential/new system	# Baths	
Vance Johnson Plumb		(910) 424-6712	
Plumbing Contractor's		Telephone	
3242 Midpine Drive Fa		eblanchard@vjplumbing.com	
Address	yetteville, IVC	Email Address	
7756-PL			
License #			
LICOTION II	Insulation Contractor Inform	ation	
Cumberland Insulation	n 4205 Clinton Road Favetteville NC 28312	(910) 484-7118	

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

Telephone

Insulation Contractor's Company Name & Address



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.

	Affiday	it for Worker's	Compensation N.C.G.S. 87-14
The un	dersigned applicant being		Compensation Molecus.
<u>x</u>	_ General Contractor	x Owner _	Officer/Agent of the Contractor or Owner
	eby confirm under penal h in the permit:	ties of perjury that	the person(s), firm(s) or corporation(s) performing the work
	Has three (3) or more er	mployees and has	obtained workers' compensation insurance to cover them.
them.	Has one (1) or more sub	econtractors(s) and	has obtained workers' compensation insurance to cover
	Has one (1) or more sub g themselves.	contractors(s) who	has their own policy of workers' compensation insurance
	Has no more than two (2	2) employees and n	o subcontractors.
Departi	ment issuing the permit r	may require certification	is sought it is understood that the Central Permitting ates of coverage of worker's compensation insurance prior be permitted work from any person, firm or corporation
Sign w/	Title: VICE Dress	dent	Date: 3 11 21