

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
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 ficensed contractor, Address, company name & phone must match information on license.

or. Address, company phone must match on license.	Application for Residential Building and Trades Permit	
	riness & Cates Builidng and Developme	
Site Address:	31 Kensinton Drive	100
Subdivision: Anderso	on Creek Club/Anderson Creek Crossing	Lot: 183
Description of Propos	sed Work: _new single family dwelling	Total Job Cost: <u>A6200</u>
	General Contractor Inform	nation
Caviness & Cates Buil Building Contractor's	ding and Development Company Company Name	(910) 778-7902 Telephone
639 Executive Place S Address	te 400 Fayetteville. NC 28305	pam@cavinessandcates.com Email Address
59586	HEATED SO FT 2695 GARA	GE SQ FIL
License #	Electrical Contractor Infor	mation
Description of Work	new residential/new system Service	Size: 200 Amps T-Pole: X Yes No
Tarheel Pride Electric Electrical Contractor	Corp	(910) 303-2334 Telephone
PO BOX 458 Stedma		thpelectric02@yahoo.com
Address	111,170	Email Address
22985-L License #	Mechanical/HVAC Contractor I	Information
Carolina Comfor Air		(910) 339-2374
Mechanical Contractor's Company Name		Telephone
PO Box 699 Dunn, N Address 29077 License #	IC	rebecca@carolinacomfortair.com Email Address
Licariac #	Plumbing Contractor Infor	mation .
Description of Work	new residential/new system	# Baths
Vance Johnson Plum		(910) 424-6712
Plumbing Contractor	's Company Name	Telephone
3242 Midpine Drive I	Fayetteville, NC	eblanchard@vjplumbing.com
Address 7756-PL		Email Address
License #	Insulation Contractor Infor	mation
Cumberland Insulati	on 4205 Clinton Road Fayetteville, 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.

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.
$\frac{x}{x}$ 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: VICE Drestaln Date: Da