Electrical Contractor Change



Permit

SFD2104-0016

* 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

Owner's Name: Caviness Land Development	Date: 5/26/202
Site Address: 46 Silk Oak Dr	Phone: 910-339-6330
Subdivision: Forest Oaks Phs 5	Lot: 268
Description of Proposed Work: New Home - Residential	Total Job Cost: \$171,540.00
General Contractor Information	1
Caviness Land Development	910-339-6330
Building Contractor's Company Name	Telephone
1041 B Robeson St Fayetteville, NC 28305	cynthia@cavinessland.com
Address	Email Address
37485	465
License #	and the second s
Electrical Contractor Information	
Description of Work New Home - Residential Service Size: Parnell Electric	200 Amps T-Pole: X Yes No 910-237-2751
Electrical Contractor's Company Name	Telephone
6400 Allie Cooper Rd Godwin NC 28344	parnellelectric@gmail.com
Address	Email Address
24236-u	
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work New Home - Residential	
Carolina Comfort Air	910-339-2374
Mechanical Contractor's Company Name	Telephone
701 N Clinton Ave, Dunn NC 28334	
Address	Email Address
29077	
License #	
Plumbing Contractor Information	
Description of Work New Home - Residential	_# Baths
Shawn Glover	919-868-0959
Plumbing Contractor's Company Name	Telephone
304 Quail Hollow, Sanford NC 27332	
Address	Email Address
23160	
License #	
Insulation Contractor Information	-
Cumberland Insulation 4205 Clinton Rd Fayetteville NC 28312	910-484-7118 Tolonbono
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

5/26/2021

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
General Contractor OwnerX 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.
\underline{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: Cjacobs officer/agent Date: 5/26/2021