

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 licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: H&H CONSTRUCTORS OF FAYETTEVILLE	Date:6/9/2021			
Site Address: 56 Kingswood Court Lillington NC 27546	Phone: 910-486-4864			
Subdivision: Oakmont	Lot:327			
Description of Proposed Work: SFD	Total Job Cost: _ 230,166			
General Contractor Informat	ion			
H&H Constructors of Fayetteville, Inc	910-486-4864			
Building Contractor's Company Name	Telephone			
2919 Breezewood Ave Suite 400, Fayetteville NC 28303 tamaragreen@hhhome				
Address	Email Address			
74158 HEATED SQ FT 3480 GARAGE	SQ FT 473			
License #				
Electrical Contractor Informa	ition			
	<u>re: 200 </u>			
JM Pope Electrical LLC	919-776-5144			
Electrical Contractor's Company Name	Telephone			
409 Chatham St Sanford NC 27330	electricpope@windstream.net			
Address Email Address				
21326				
License #				
Mechanical/HVAC Contractor Info	<u>ormation</u>			
Description of Work Residential				
Carolina Comfort Air, Inc.	919-934-1060			
Mechanical Contractor's Company Name Telephone				
5212 US Hwy 70 Business Clayton NC 27520 carolinacomfortair@y				
Address Email Address				
29077				
License #				
Plumbing Contractor Informa				
Description of Work Residential	# Baths3.5			
Vance Johnson Plumbing Co	910-424-6712			
Plumbing Contractor's Company Name Telephone				
3242 Mid Pine Drive Fayetteville NC 28306 etoepfer@vjplumbing.c				
Address Email Address				
07756-P1				
License #				
Insulation Contractor Information				
Tri-City Insulation 418 Person St Fayetteville NC 28301	910-486-8855			
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.

is as per current lee sch	saule.		
Tame Signature of Owner/Con	му Green tractor/Officer(s) of Corporation	6/9/2021 n Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:			
X General Contra	ctorOwnerX_	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:			
X Has three (3) or n	nore employees and has obtain	ned workers' compensation insura	ince to cover them.
Has one (1) or mothem.	ore subcontractors(s) and has	obtained workers' compensation in	nsurance to cover
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:	Tammy Green	Date:	6/9/2021