

Application # _____

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name:	Joana & Richa	Joana & Richard Elliot					08/25/2	:022
Site Address:		8 Norrington Rd, Lillington, NC 27546 Phone					(910) 432-2070	
Subdivision:	Richard Ellio	Richard Elliot Lot#2				#2		
Description of P	roposed Work:	New Construc	ction Ho	me	_ Total Job Cost	\$35	3,363.34	
-		General C	ontract	tor Information				
Riverstone Construction & Home Improvement Company					(910) 977-0709			
Building Contrac	ctor's Company I	Name		<u> </u>	Telephone			_
2018 Fort Bragg Rd, Suite 118B, Fayetteville, NC 28303					rscoffice118@gmail.com			
Address					Email Address			
81849		HEATED SQ FT	3437	GARAGE SQ	FT 649			
License #								
Description of W	√ork Electrical R	<u>Electrical C</u> ough-ins and Finals		tor Information	<u>. </u>	Pole: X	Yes	N
Cornerstone Ele		<u></u>		_ 0011100 0120	910-850-1869			
Electrical Contractor's Company Name					Telephone			
4051 Village Dr., Fayetteville, NC 28304					mandkheble@gmail.com			
Address					Email Address			
10801					211141171441000			
License #								
Licerice "		Mechanical/HV	AC Coi	ntractor Informa	ation_			
Description of W	Vork Mechanica	al Installtions and Fir	nal					
Performance Heating & Air					910-273-1836			
Mechanical Contractor's Company Name					Telephone			
5217 Hornbeam Rd, Fayetteville, NC 28304					performanceheatingair@yahoo.com			
Address					Email Address			
29759								
License #								
			Contrac	ctor Information	<u>l</u>			
Description of W	Vork Plumbing Ro	ugh-ins and Finals			# Baths 4			
Plumb Co					910-824-7730			
Plumbing Contractor's Company Name					Telephone			
111 Open View Dr, Fayetteville, NC 28312					plumbcofayetteville@gmail.com			
Address					Email Address	_		
32186								
License #		_	_					
O# 11.4	9.0 			ctor Information	_			
		54 Camden Rd., Fa		e, NC 28306	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.

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 Date
Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:
The undersigned applicant being the.
General Contractor Owner Officer/Agent of the Contractor or Owner
Do beroby confirm under penaltics of perjury that the person(s) firm(s) or corporation(s) performing the work
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:
Sectional in the permit.
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
Lieu and (4) as made as beauty attacked and has abtained sources, agree and time income as to accome
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.
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.
rido no more than two (2) employees and no substitutions.
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.
our fing out the north.
Sign w/Title: Date: