

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

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: RODOLFO HINO1029	Date
Site Address: 660 Jasmine Rd. Fuguay-Vanna, NC, 27526 Phone 919-70-3822	
Subdivision: N A	Lot
Description of Proposed Work: CONSMICTION OF NEW SEA	
General Contractor Information	
Building Contractor's Company Name	919-980-0003 Telephone
12809 US HWY 70 BUSINESS WEST Clayton, NC, 27520	Kallie exeddourhomethe, com
Address	Email Address
79810 HEATED SOFT 2595 GARAGE SC	420
License #	
Description of Work MSTAVI Electrical Contractor Information Description of Work MSTAVI Electrical Contractor Information Description of Work MSTAVI Electrical Contractor Information	1 700 Amps T-Pole: Ves No
Opilvia Enterprises	919-337-7633
Electrical Contractor's Company Name	Telephone
5325 Hidwell Place Apex, NC, 27539	pailviceleutric1994@gmail.com
Address	Email Address
17n410-U	
License #	
Mechanical/HVAC Contractor Information	
Description of Work MSTALL MCCHANICAL IN Sta	
Camina Comfort Prix	919-550-7711
Mechanical Contractor's Company Name	Telephone
5212 WS HWY 70 Business west Claypon, NC 27520	1essicavaughan@canlinawmfortair.
Address	Email Address Calm
31589	
License #	
Plumbing Contractor Information	
Description of Work NSTALL PLUMBING IN STA	# Baths
David Balcer blumbing	919-404-2600
Plumbing Contractor's Company Name	Telephone
2245 NL MWY 39 Zebulin NO 27597	dbakerplumbing@aol.aum
Address	Email Address
8704	
License # Insulation Contractor Informatio	n
	919-800-3050
	Telephone
Insulation Contractor's Company Name & Address 27579	Гегерпопе

*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.

Signature of Owner/Contractor/Officer(s) of Corporation

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
General Contractor 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	e to cover them.	
Has one (1) or more subcontractors(s) and has obtained workers' compensation insuthem.	ırance to cover	
Has one (1) or more subcontractors(s) who has their own policy of workers' compens covering themselves.	sation insurance	
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 Department issuing the permit may require certificates of coverage of worker's compensatio to issuance of the permit and at any time during the permitted work from any person, firm or carrying out the work.	on insurance prior	
Sign w/Title LOUW 19 - Permitting Clordinatur Date: 11	16/21	