

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: 8/10/2021			
Site Address: 107 Glenmont Creek Place	Phone: 910-486-4864			
Subdivision: William Farm	Lot: 40			
Description of Proposed Work: SFD	Total Job Cost:210,636			
General Contractor Informa				
H&H Constructors of Fayetteville, Inc	910-486-4864			
Building Contractor's Company Name	Telephone			
2919 Breezewood Ave Suite 400, Fayetteville NC 28303	tamaragreen@hhhomes.com			
Address	Email Address			
74158 HEATED SQ FT 2872 GARAG	E SQ FT 652			
License #				
Electrical Contractor Inform	ation			
	ize: <u>200 </u> Amps T-Pole: <u> </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 In:	formation			
Description of Work Residential	Ionnation			
Carolina Comfort Air, Inc.	919-934-1060			
Mechanical Contractor's Company Name	Telephone			
· ·				
Address	carolinacomfortair@yahoo.com Email Address			
29077	Liliali Addiess			
License #				
Plumbing Contractor Inform	nation_			
Description of Work Residential	# Baths 3			
Titan's Plumbing Company	910-904-1652			
Plumbing Contractor's Company Name Telephone				
526 Swift Creek Road, Raeford NC 28376	·			
Address	Email Address			
22085				
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.



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.

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Tammy Green		8/10/20	21	
Signature of Owner/Contractor/Officer(s) of Contractor/Officer(s)	Corporation	Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
X General Contractor Owne	r <u>X</u>	_ Officer/Agent of the C	ontractor o	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 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.				
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 Gr	een		Date:	8/10/2021