

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: Vucan Homes	Date2/25/2022	
Site Address: 40 Truman Lane, Cameron		
	Lot	
Description of Proposed Work: New Home		
General Co	ntractor Information	
<u>Daniel Wright Constrution</u> Building Contractor's Company Name	910-379-2360 Telephone	
4960 Rockfish Road, Raeford NC 28376 Address	nwrightllc@dnwrightllc.com Email Address	
64834 HEATED SOCRET	2032 GARAGE SQ FIL_434	
Electrical Contractor Information		
Description of Work	Service Size: 200 Amps T-Pole: X Yes No	
Above and Beyond Electric Electrical Contractor's Company Name	Telephone	
PO Box 820 Parkton, NC A	boveandbeyondelectricllc@gmail.com	
Address 34465	Email Address	
License #		
	C Contractor Information	
Description of Work		
Certified Heating and Air		
Mechanical Contractor's Company Name	Telephone	
PO Box 1071 Hope Mills, NC	Ehrin.certifited@gmail.com	
Address	Email Address	
20012		
License #  Plumbing Co	ntractor Information	
Description of Work	***	
	910-536-6362	
Plumbing Contractor's Company Name	Telephone	
252 Daily Road, Maxton	sblue2888@gmail.com	
Address	Email Address	
33026		
License #	where where the first and the con-	
<del> </del>	ntractor Information	
Stornaway Construction Insulation Contractor's Company Name & Address	910-988-4070 Telephone	
mediation confidence of company Name & Address	relephone	

\*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.

Den L	2/25/2022	
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:		
X General Contractor Owner 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 to cover them.	
Has one (1) or more subcontractors(s) and has obtathem.	ined workers' compensation insurance 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 Department issuing the permit may require certificates of coto issuance of the permit and at any time during the permitt carrying out the work.	overage of worker's compensation insurance prior	
Sign w/Title:	<b>⊘Wn</b> Date:2/25/2022	