

* 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: Phillip & Ferwifer Frood Site Address: 2436 Old US 421, Lillington P | Date 10/5/21 | |
|--|--|--|
| Site Address: 2436 Old US 421, Lillington P | hone 919.795.8819 or 919.795,677 | |
| Subdivision: N/4 | Lot | |
| Description of Proposed Work: New Cowst. SFR | Total Job Cost | |
| General Contractor Information | | |
| | - 890 - 3979 | |
| Building Contractor's Company Name | Telephone | |
| P.O. Box 2364 DUNN NC 28335 Ste | gc. tommy @ gmail. com | |
| Address | Email Address | |
| | AGESQ FT 622 | |
| License # Electrical Contractor Inform | nation | |
| Description of Work New Construction Service S | Amps T-Pole: (Yes) No | |
| V.M. Pope Electric | 919,776.5144 | |
| Electrical Contractor's Company Name | Telephone | |
| 409 Chatham St., Sanford | shpelectrical chotmail. com | |
| Address | Email Address | |
| 21326 L | | |
| License # | | |
| Mechanical/HVACContractor Information | | |
| Description of Work New Construction | | |
| B&S Air Conditioning Co., INC 91 | | |
| Mechanical Contractor's Company Name | Telephone | |
| 5446 ELEVATION Rd., BENEN, NC 27904 | | |
| Address | band salv conditioning @centurylink. | |
| 4256 | band sair Conditioning & Contract of the | |
| License # Plumbing Contractor Information | | |
| Description of Work New Construction | | |
| | 615. 1947 | |
| Plumbing Contractor's Company Name | Telephone | |
| P.O. Box 1045, DUNN, NC 28335 | businessetitans plumbing. com | |
| Address | Email Address | |
| L. 34800 | Zindii / Iddi 000 | |
| License # | | |
| Tatum Insulation Contractor Information 1 919.661.0999 | | |
| Jahum Jusulatin GARNER NC | 919.661.0999 | |
| Insulation Contractor's Company Name & Address | Telephone | |

*NOTE: General Contractor / owner must fill out and sign the second page of this application.



is as per current fee schedule.

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 meand 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 CountyCentral 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

| | More VI. West 10.5.2021 |
|---|---|
| | Signature of Owner/Contractor/Officer(s) of Corporation Date |
| | |
| | |
| I | Affidavit for Worker's CompensationN.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 obtainedworkers' compensation insurance to cover them. |
| 1 | Has one (1) or more subcontractors(s) and has obtainedworkers' compensation insurance to cover them. |
| 1 | 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: Thomas H. Manager Date: 10.5.2021 |
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