

Application # SFD2110-0041

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

Application for Residential Building and Trades Permit

on on license.		
Owner's Name: Cheyenne Developers LLC	Date: <u>10/26/202</u>	
Site Address: 117 Hawks Croft Cr, Erwin, NC	Phone: 919-639-2231	
Subdivision: Wildwood	Lot:14	
Description of Proposed Work: <u>New SFD</u>	Total Job Cost: <u>163,000</u>	
General Contractor Infor	mation	
Freedom Constructors Inc of Dunn	910-892-1231	
Building Contractor's Company Name	Telephone	
PO BOX 608, Dunn, NC 28334	STEVEJERNIGAN58@OUTLOOK.COM	
Address	Email Address	
11590 UL HEATED SQ FT 1710 GARA	AGE SQ FT 631	
License #		
Electrical Contractor Info		
	Size: <u>200</u> Amps T-Pole: <u>×</u> Yes No	
Wester & Pace Electric, INC	<u>919-498-4948</u>	
Electrical Contractor's Company Name	Telephone	
614 Leslie Rd, Sanford, NC Address	<u>williamwester@gmail.com</u> Email Address	
	Email Address	
12007-U License #		
Mechanical/HVAC Contractor	Information	
Description of Work New SFD Mechanical		
J & M Heating and Air Condition Co Inc	910-897-5501	
Mechanical Contractor's Company Name	Telephone	
724 Turlington Rd. Dunn, NC 28334 jandmhvac@cen		
Address Email Address		
L.17164		
License #		
Plumbing Contractor Info	<u>rmation</u>	
Description of Work Plumb new SFD	# Baths 2	
LR Glover Plumbing Co	919-894-5892	
Plumbing Contractor's Company Name	Telephone	
111 Carolyn Drive, Benson,NC 27504	·	
Address	Email Address	
L.07958		
License #		
Insulation Contractor Info		
Insulating Inc 5902 Fayetteville Rd, Raleigh, NC	919-772-9000	
Insulation Contractor's Company Name & Address		
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.

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.

10/26/2021

Timothy M. Tart 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:

General Contractor _____ Owner X ____ 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:

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

Х 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:	Timothy M. Tart	Estimating Mgr	Date:	10/26/2021
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