

* 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: Alberto Santoni	Date	3/10/22	<u> </u>
Site Address: 1683 Josey Williams Rd, Erwin, NC 28339		Phone	(919) 749-5793
Subdivision: n/a			
Description of Proposed Work: new construction –			
General Contractor Information			
Schumacher Homes of NC, Inc. Building Contractor's Company Name		919-724-4465 Telephone	
182 W Hamlin Rd, Benson, NC 27504 Address		aallen@schumad Email Address	cherhomes.com
58362 HEATED SQ FT 3215 G	SARAG	E SQ FT 488	
Description of Work <u>electrical work</u> Service Size:	The same of the sa	<u>!</u> _Amps T-Pole: _	X_YesNo
TW Electric Electrical Contractor's Company Name		(919) 524-7384 Telephone	
541 Graham Pond Rd, Angier, NC 27501 Address		twelectricsvc@gr Email Address	mail.com
19725-L License # Mechanical/HVAC Contractor In	nforma	ation	
Description of WorkHVAC			
Ultimate Comfort Mechanical Contractor's Company Name		(919) 803-3544 Telephone	
1508 S Saunders St, Raleigh, NC Address		ultimatecomforthy Email Address	vac@gmail.com
30531 / H2-H3 I License #			
Plumbing Contractor Inform			
Description of Work Plumbing #	Baths_	3.5	
A & R Plumbing		(919) 609-3650	
Plumbing Contractor's Company Name		Telephone	
224 Clearwater Dr., Smithfield, NC 27577 Address		arplumbingllc@gr Email Address	mail.com
34300 License #			
Insulation Contractor Information			
Insulating Inc, 1212 Home Court, Raleigh, NC 27603 Insulation Contractor's Company Name & Address		(919) 772-9000 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.

carrying out the wo

Sign w/Title:

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

X 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:

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.

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