

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: Weaver Homes Inc.	Date 6/8/22
Site Address: 328 Grameta Lane, Lillington, NC 2754	Phone 910.630.2100
6 Subdivision: O'Quinn	Lot ⁵
Description of Proposed Work: New Construction	\$120,000 Total Job Cost
General Contractor Information	
Weaver Homes Inc.	910.630.2100
Building Contractor's Company Name 350 Wagoner Dr. Fayetteville, NC 28303	Telephone susan@weaver-homes.com
Address	Email Address
75971 HEATED SQ FT_1820 GARAGE SQ	FT_752
License #	
Description of Work New Construction Service Size:	<u>1</u>
Electrical Contractor's Company Name 80 Neill Thomas Rd, Lillington, NC 27546	Telephone
Address 21643-U	Email Address
License #	
Mechanical/HVAC Contractor Inform New Construction	<u>ation</u>
Description of Work	
Central Air Inc.	919-398-4281
Mechanical Contractor's Company Name PO Box 175 Four Oaks, NC 28303	Telephone
Address 28699	Email Address
License #	
Plumbing Contractor Information New Construction	<u>1</u> 2.5
Description of Work	_# Baths
Double J Plumbing	910-814-7705
Plumbing Contractor's Company Name 614 Byrd Rd, Bunnlevel, NC 28323	Telephone
Address	Email Address
21649	
License #	
Insulation Inc. Insulation Contractor Information	<u>n</u> 919-770-1974
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.

Susan Rodriguez	6/8/22	
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 perse set forth in the permit:	on(s), firm(s) or corporation(s) performing the work	
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.	ained workers' compensation insurance to cover	
X Has one (1) or more subcontractors(s) who has the covering themselves.	ir own policy of workers' compensation insurance	
Has no more than two (2) employees and no subco	ntractors.	
While working on the project for which this permit is sough Department issuing the permit may require certificates of to issuance of the permit and at any time during the permit carrying out the work.	overage of worker's compensation insurance prior ted work from any person, firm or corporation	
Susan Rodriguez Sign w/Title:	Date: 6/8/22	