

Application # 5FD 2203-0068

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.hamett.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 information on license.

## Application for Residential Building and Trades Permit

on on license.	27 1
Owner's Name: Cumberland Homes Inc	Date: 4-6-22
Site Address: 64 old hamilton Road Dunn No	
Subdivision:	Lot: 64
Description of Proposed Work: New constructon Build	Total Job Cost: 112, 000
General Contractor Information	
Cumperland Homes, Tre.	910-892-4345
Building Contractor's Company Name	Telephone
P.O. Box 727 Dung M.C. 28335	NOTTIS bu blinggroup re e gua
Address HEATED SOET 4 8 5 GARAGES	Email Address
License # HEATED SQ FT 14 8 5 GARAGES	QEI /V/FI
Electrical Contractor Information	on
Description of Work NSF Dwelling Service Size	ZOO Amps T-Pole: Ves No
JB Allen Electrical	910-232-1928
58.04 Burson Harder Road Burson No 27504	Telephone  ///A
Address	Email Address
28206	
License #	
Mechanical/HVAC Contractor Information	
Description of Work NSF Dwelling	010 270 0/8/
Mechanical Contractor's Company Name	919-329-0686 Telephone
343 Shipwash Dr., Garner, No.	NA
Address,	Email Address
18644	
License #	
Plumbing Contractor Informati	
Description of Work NSF Dwelling	# Baths
David Baker Plunchice	919-422-5920
2243 Hwy 39 Zebulon, N.C.	Telephone
Address /	Email Address
8704	
License #	
Intum The Insulation Contractor Informat	919-16/1-0000
Insulation Contractor's Company Name & Address	Telephone
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.

Signature of Owner/Contractor/Officer(s) of Corporation

9/0/27

Date

Affidavit for Worker's Compensation N.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 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 carrying out the work.	
Sign w/Title: Date: 4/6/22	