

* 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: Michael & Cassie Bauer	Date 3/27/22
Site Address:	
Subdivision:	
Description of Proposed Work: New Home build	Total Job Cost \$400 000
General Contractor Informati	•
	
Michael Bauer Building Contractor's Company Name	<u>(919) 498 - 4090</u> Telephone
369 Overhills Rd. Linden, NC 28356 Address	<u>mike bauer @iveym</u> echani Email Address
HEATED SQ FT 3580 GARAGE	so F1 950
License #	tion.
Description of Work Line voltage electrical systems complete Service Size	
Allman Electric Corporation	910-485-8617
Electrical Contractor's Company Name	Telephone
345 Wilkes Road, Fayetteville, NC 28306	admin@allmanelectric.com
Address	Email Address
6136-U	
License #	
Mechanical/HVAC Contractor Info	<u>rmation</u>
Description of Work HVAC system complete	
Foust Heating & Air Conditioning, Inc.	910-323-0587
Mechanical Contractor's Company Name	Telephone
2976 Dunn Road, Fayetteville, NC 28312 Address	mike@foustair.com Email Address
17439 H2-H3 <u>27413 SP-PH</u>	Lillali Address
License # Plumbing Contractor Informat	ion
Description of Work Plumbing systems complete	# Baths
Michael Bauer	(919) 498-4090
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	
Insulation Contractor Informat	<u>ion</u>
Cumberland Insulation Co. 4205 Clinton Road, Fayetteville, NC 28312	910-484-7118
Insulation Contractor's Company Name & Address	Telephone

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



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Site Address:	•
Subdivision:	Lot
Description of Proposed Work: New Home build	Total Job Cost \$400 000
General Contractor Informati	•
Michael Bauer	<u>(919) 498-4090</u>
Building Contractor's Company Name	Telephone
369 Overhills Rd. Linden, NC 28356 Address	mike hauer @iveymechani Email Address
HEATED SQ FT 3580 GARAGE	SQ FI 950
License #	-
Description of Work Low voltage electrical systems Secondary Electrical Contractor Informat Service Size	
In Home Tech Electrical Contractor's Company Name	910-479-4940 Telephone
2825 Arlington Avenue, Fayetteville, NC 28303	sales@ihtech.biz
Address	Email Address
U.28907	
License #	
Secondary Mechanical/HVAC Contractor Info	<u>rmation</u>
Description of Work Fireplace install/gas line	
Gore Heating and Air	910-838-9071
Mechanical Contractor's Company Name	Telephone
585 Gillespie Street, Fayetteville, NC 28301	
Address	Email Address
13720	
License #	ion
Plumbing Contractor Information	
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Tuttibing Contractor's Company Name	relephone
Address	Email Address
License #	
Secondary Insulation Contractor Informat	<u>ion</u>
Coastal Crawl Space Repair 305 Blue Creek School Road Unit 8 Jacksonville, NC 28540	910-378-7009
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.

White our

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

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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: 27 Parlant Sauce Date: 3/27/22		