## **VENDOR CHANGE ELECTRIC**



Application # \_\_\_\_\_

\* 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. Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## Application for Residential Building and Trades Permit

ation on license.	10/20/2022
Owner's Name: H&H CONSTRUCTORS OF FAYETTEVILLE,LLC	Date: 10/20/2022
Site Address: 75 Mary Roberton Street	
Subdivision: Schabert Crossing	
Description of Proposed Work: SFD	Total Job Cost: <u>174,596</u>
General Contractor Informatio	<u>n</u>
H&H Constructors of Fayetteville, LLC	910-486-4864
Building Contractor's Company Name	Telephone
3709 Raeford Road Suite 200 Fayetteville NC 28304	tamaragreen@hhhomes.com
Address 74846 HEATED SQ F 2433 GARAGES	Email Address
74840 HEATED SO FT 2433 GARAGES	394_
License #	*****
Description of Work Residential Service Size	e: <sup>200</sup> Amns T-Pole: XX Yes No
buford electric, LLC	910-491-5490
Electrical Contractor's Company Name	Telephone
5247 US HWY 301 S HOPE MILLS 28348	bufordelectric@gmail
Address	Email Address
31424-11	
License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work Residential	
Carolina Comfort Air, Inc.	919-934-1060
Mechanical Contractor's Company Name	Telephone
5212 US Hwy 70 Business Clayton NC 27520	carolinacomfortair@yahoo.com
Address	Email Address
29077	
License # Plumbing Contractor Informati	on
Description of Work Residential	— # Baths 3
	919-902-0990
Titan's Plumbing Company Plumbing Contractor's Company Name	Telephone
PO Box 1045	
Address	Email Address
34800	
License #	×
Insulation Contractor Informati	
Tri-City Insulation 418 Person St Fayetteville NC 28301	910-486-8855
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.

is as per current fee schedule.		
Tammy Green		
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 _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.		
X 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:		
<b>V</b> .		