

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: Albert : Dorothy Fleming Site Address: 354 Pointer Creek Dr. Angier	Date
Site Address: 354 Pointer Creek Dr. Angier	Phone (99)639-201
Subdivision: Pointers Creek Farms	Lot5
Description of Proposed Work: New Construction Single Family	Total Job Cost
General Contractor Information	aling
Bradley Built Inc.	(919) 669 - 9611
Bradley Built Inc. Building Contractor's Company Name	Telephone
466 Stancil Rd. Angier NC 27501	bo@bradleybuithe.com Email Address
Address	
54519 HEATED SQ FT 3180 GARAGE SQ	FT 1291 Basement 1474
License # Electrical Contractor Information	
Description of Work <u>SFD</u> Service Size:	200_Amps T-Pole: V_YesNo
Sno Electrical	(919) 427-6952
Electrical Contractor's Company Name	Telephone
19655 NC 210 Hwy Angier NC 27501	
Address	Email Address
13075- L License #	
Mechanical/HVAC Contractor Informs	ation
Description of Work _ SFD	
Stephenson Heating : Air Inc.	(919) 329-0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr. Garner NC 27529	
Address	Email Address
186 44	
License # Plumbing Contractor Information	1 - 1
Plumbing Contractor Information	# Baths 3 1/2
Description of Work SFD	# Baths 3 1/2 (919) 422-2133
Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name	# Baths 3 1/2
Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name	# Baths 3 1/2 (919) 422 - 2133
Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name 239 Millwood Lane Angier No 27501 Address	# Baths 3 1/2 (919) 422 - 2133
Plumbing Contractor Information Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name 239 Millwood Lane Angier No 27501 Address P17735	# Baths3_/12
Plumbing Contractor Information Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name 239 Millwood Lane Angier No 27501 Address P17735 License #	# Baths
Plumbing Contractor Information Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name 239 Millwood Lane Angier No 27501 Address P17735 License # Insulation Contractor Information	# Baths 3 12 (919) 422 - 2133 Telephone Email Address
Plumbing Contractor Information Description of Work SFD Barnes Plumbing Inc. Plumbing Contractor's Company Name 239 Millwood Lane Angier No 27501 Address P17735 License #	# Baths 3/12 (919) 422 - 2133 Telephone Email Address

*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

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: Wendy S. Downam Date: 9-22-22			