

Application # SFD2210-0045

\* 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: Aaron Alvarez	
FCC4 Dad Lill Church Dand	Phone
Subdivision:	Lot
Description of Proposed WorkSingle Family New Contruction I	
General Contractor Informat	
Aaron Alvarez	
Building Contractor's Company Name	Telephone
·	
Address	Email Address
License # HEATED SQ FT GARAGE	SQ FT
Electrical Contractor Informa	<u>ition</u>
Description of Work Service Siz	e:Amps T-Pole:YesNo
Electrical Contractor's Company Name	Telephone
Electrical Contractor's Company Name	тетернопе
Address	Email Address
License #	
Mechanical/HVAC Contractor Info	
Description of Work New Installation-2 split heat pumps, gas	· · · · · · · · · · · · · · · · · · ·
Carolina Comfort Air  Mechanical Contractor's Company Name	919-550-7711 and venting hood Telephone
PO Box 190 Clayton, NC 27520	RNC_permits@carolinacomfortair.com
Address	Email Address
31589	
License #	
Plumbing Contractor Informa	<u>ition</u>
Description of Work	# Baths
Dharabin a Control to de Consulation Name	Talaahana
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	
Insulation Contractor Informa	ation_
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	10/8/2024	
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:		
General Contractor Owner C	Officer/Agent of the Contractor or Owner	
Do hereby confirm under penalties of perjury that the personant 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	
Has one (1) or more subcontractors(s) who has their covering themselves.	r own policy of workers' compensation insurance	
Has no more than two (2) employees and no subcor	ntractors.	
While working on the project for which this permit is sought Department issuing the permit may require certificates of c to issuance of the permit and at any time during the permit carrying out the work.	overage of worker's compensation insurance prior	
Sign w/Title:	Date:	