



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.

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

22 May 23
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: Charles Moore General Contractor Date: 22 MAY 23



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

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Charles Moore Date _____
Site Address: 74 S Lens Dr SpringLake, NC 28390 Phone 910-333-7336
Subdivision: _____ Lot _____
Description of Proposed Work: Build Single-Family Home Total Job Cost: \$200,000

General Contractor Information

Charles Moore 910 333 7336
Building Contractor's Company Name Telephone
302 Country Club Dr Jacksonville, NC scymour1161@gmail.com
Address Email Address
License # 2854 642

Electrical Contractor Information

Description of Work Install Electrical Wiring Service Size: _____ Amps T-Pole: Yes No
Ides Electric 910-990-5635
Electrical Contractor's Company Name Telephone
1937 Edmond Mattie's Rd Clinton, NC _____
Address Email Address
24870-U _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work Install new A/C system
Core Heating & Air 910 565 8956
Mechanical Contractor's Company Name Telephone
585 Gillespie St Fayetteville, NC _____
Address Email Address
13720 _____
License # _____

Plumbing Contractor Information

Description of Work Install new plumbing # Baths 3.5
Pipe Boss Plumbing 910-364-6764
Plumbing Contractor's Company Name Telephone
2270 Ridge Manor Dr Fayetteville, NC _____
Address Email Address
35605 _____
License # _____

Insulation Contractor Information

Demores Insulation 719 Newbridge St 910 581 5560
Insulation Contractor's Company Name & Address Telephone
Jacksonville, NC

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