

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.

Application # \_ Harnett County Central Permitting PO Box 65 Ullington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnelt.org/permits

Application for Residential Building and Trades Permit

Owner's Name: John Paul D. Ancheta	Date: 14 Sep 201
Sile Address: Raynor-McLamb Rd, Bunnler	el NC 28323 Phone: 570-378-7091
Subdivision:	Lot:
Description of Proposed Work: Finished Home	Total Job Cost: 130,000
General Contractor Info	rmation
Owner	510-378-7091
Building Contractor's Company Name 5599 Lockridge Rd., Fayetteville, NC 28311	Telephone jpaul_d12@yahoo.com
Address	Email Address
License # HEATED SQ FT 2084 GARA	AGE SQ FT_475
Electrical Contractor Info	rmation
Description of Work Wire the house to engineer, specs Service Owner	Size: 200 Amps T-Pole: x Yes No 510-378-7091
Electrical Contractor's Company Name 5599 Lockridge Rd., Fayetteville, NC 28311	Telephone jpaul_d12@yahoo.com
Address	Email Address
Description of Work Place 2 Split unit Owner	510-378-7091
Mechanical Contractor's Company Name	Telephone
5599 Lockridge Rd., Fayetteville, NC 28311	jpaul_d12@yahoo.com
Address	Email Address
icense # Plumbing Contractor Inform	nation
Description of Work Plumb the whole house to engineer, specs	# Baths 2
Owner	510-378-7091
lumbing Contractor's Company Name	Telephone
599 Lockridge Rd., Fayetteville, NC 28311	jpaul_d12@yahoo.com
ddress	Email Address
cense#	
Insulation Contractor Inform	
Owner sulation Contractor's Company Name & Address	510-378-7091
Suidiful Cultractor's Company Nama & Address	Tologia

\*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 parmission to obtain these powerlay and if any spaces are some including listed contractors. permission to obtain these permits and if any changes occur including listed contractors 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

14 Sept 2023

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 set forth in the permit:	work
Has three (3) or more employees and has obtained workers' compensation insurance to cover the	iem.
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to conthem.	ver
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insura covering themselves.	ince
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 to issuance of the permit and at any time during the permitted work from any person, firm or corporation	
carrying out the work. Sign within Alm MAN Man	3