

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

## Application for Residential Building and Trades Permit

Owner's Name: Chesapeake Homes	Date //17/24
Site Address: 121 BARN DECR DR	Phone 416-212-4060
Subdivision: The furm of Neil'S creek	Lot /31
Description of Proposed Work: New wastruction single family	
General Contractor Information	
Chesapewke Homes	<u>410-212-4060</u> Telephone
Address Smoketree Ct. Swite 210	bblough Ocheshomes, com Email Address
License # HEATED SQ FT 243 6 GARAGE SQ	FT 420
Description of Work Single funily New Contractor Information	
Roman off Electric Electrical Contractor's Company Name	<b>914 - 848 - 4652</b> Telephone
3006 Industrial Dr. ste-120 Rulcigh, NC 27609 Address	Tholen @ roman aff group, cl Email Address
<u>U- 12q15</u> License #	
Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work single family New construction	***************************************
Mechanical Contractor's Company Name	<u> </u>
240 Junnes Blid twite 120 Raleigh, Nr. 27111	. dhermandez @ yahyac.com Email Address
32872 License #	
Plumbing Contractor Informatio	<u>n</u>
Description of Work single family New construction	_# Baths <i>3</i> _
Plumbing Contractor's Company Name	Telephone
2428 Reliance Ave . Agex NL 27539 Address	Email Address
29627_	
License # Insulation Contractor Informatio	n
Insulation Contractor's Company Name & Address	



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  Date	
. 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: 3 13 Date: 1/17/24	