

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: NOAH Wheelen	Date 500 15 2024	
Site Address: 34 92 O Liv 1 & RD	Date <u>Supf 15</u> 2024 Phone <u>4108496034</u>	
Subdivision:	Lot N/A	
Description of Proposed Work: New RusidentaL		
General Contractor Information	on	
Charles Eugene PA710~	9108496034	
Building Contractor's Company Name	Telephone	
1735, TREATERIL	Chuck THY102 72 Qyma.	
Address	Email Address	
33685 HEATED SQ FT 2091 GARAGE	SQ FT	
License #		
Description of Work Kilouatt Elicinic Service Size	Amas T Dolo: You & No.	
Electrical Contractor's Company Name	719 842 7662 Telephone	
193 DARK WOOD DRIVE	Jimms Luces 1970 (D)	
Address	Email Address	
23887-6	Smart Spor	
License #		
Mechanical/HVAC Contractor Information		
Description of Work New H. L'AC Huit & Gr	5 amba	
Felvilziz & Sous HUAR	919-6696820	
Mechanical Contractor's Company Name	Telephone	
105 Rupert Rallegh - N.C.		
Andress	Support @ Fowler And	
6622	Sons, com	
License #		
Plumbing Contractor Information		
Description of Work & lumbing Daw CorsTruck	# Baths	
DELL Itaine Plinting HC.	(916) 429-9939	
Plumbing Contractor's Company Name	Telephone	
P.OBOX 650 48 FAMILY LLE 28201	· VICK'E. BLAND(d)	
Address	Email Address HITMAIL,	
3486-1	Com	
License #	tion	
Absol Tobals	910 8496034	
1/19/12 4 /17/10	10000	

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

Telephone

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.

Supt 15, 2024

	Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersign	ned applicant being the:
Gene	eral Contractor Owner Officer/Agent of the Contractor or Owner
Do hereby conset forth in the	nfirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work permit:
X Has the	ree (3) or more employees and has obtained workers' compensation insurance to cover them.
Has on them.	ne (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover
Has on covering them	ne (1) or more subcontractors(s) who has their own policy of workers' compensation insurance inselves.
Has no	o more than two (2) employees and no subcontractors.
Department is to issuance of carrying out the	g on the project for which this permit is sought it is understood that the Central Permitting saving the permit may require certificates of coverage of worker's compensation insurance prior if the permit and at any time during the permitted work from any person, firm or corporation he work.
Sign w/Title	Charles TA TI