

Application #

Harnett County Central Permitting
PO 80x 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* 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 for Residential Building and Trades Permit

& phone must match ation on license.	17 71	and the same of th	Date: 5-6-24
Owner's Name:	STeve Thomas	0 1 1 -	Old an ING
Site Address: 472	12 Malleill Hobbs. Bd.	Bunnlevel Phon	ne: <u>919 906 4069</u> 2
Subdivision:		Lot:	
Description of Propos	ed Work: _ Site built t	Total Job Co	ist:
	General Contractor	r Information	ANIA
Thomas Pro	perties	Telephone	10-4069
Building Contractor's	Company Name		rete@Windstream.net
POBOX 875 BI	roadway, NC 27505	Email Address	88
59452	HEATED SO FT	GARAGE SQ FT	
License #			
	New Home	Service Size: Amps	T-Pole:YesNo
Description of Work	ace Tions	919-4	199-3946
Wester \$ P	s Company Name	Telephone	
4105/estie Rd.	Sanford, NC 27330	williamwest	er@gmail.com
Address		Email Addre	88
12007 U			
License #	Mechanical/HVAC Cont	tractor Information	
m - Julium of Minute	New Home		
A A And a late	Heating & Air	919-77	10-3240
Mechanical Contract	or's Company Name	Telephone	
ON BAY 3210 1 PM	ion Springs, NC 28355		
Address	or spring-	Email Addre	ISS
20041			
License #	Plumbing Contract	tor information	
	New Home	# Baths	
Double J		910-8	14-7705
Plumbing Contractor	r's Company Name	Telephone	- de la - a annoil Cana
1114 Byrd. R	d. Bunnlevel, NC 2832	13 Jamiljonnso	on plumbing o gmail.com
Address		Email Addre	588
211049		040	
License #	Insulation Contrac	tor Information	1.11-1999
Tatums	Insulation	Telephone	601-0999
Insulation Contracto	or's Company Name & Address	Glaphone	

*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

5-6-24

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: Den Thomas Contractor Date: 5-6-24				