

* 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: Aslakson, Mitchell AND Kristine		Date 08/15/ <u>2024</u>
Site Address: 164 Bluberry Lane Dunn NC 28334		Phone Phone
Subdivision: N/A		
Description of Proposed Work: SFD		Total Job Cost _\$400,000
General Contraction OF ROCKFISH		<u>1</u> 910 308 1534
Building Contractor's Company Name		Telephone
445 BOSTIC RD RAEFORD NC 28376		southeasternconst@gmail.com
Address		Email Address
HEATED SQ FT 1913	GARAG	<mark>E S</mark> Q FT_488
License # 87339 <u>Electrical Contract</u>	tor Information	<u>1</u>
Description of Work electrical Buford Electric	_ Service Size:	220 Amps T-Pole: X Yes No
Electrical Contractor's Company Name 5247 U.S. HWY 301 S FAYETTEVILLE NC 28306		Telephone diane.bufordelectric@gmail.com
Address 31424		Email Address
License #		_
Mechanical/HVAC Co	ntractor Inform	<u>nation</u>
Description of Work hvac instalation		910 858 0000
CERTIFIED HEATING AND AIR		
Mechanical Contractor's Company Name 207 W DAVID PARNELL ST PARKTON NC 28371		Telephone certifiedheatingandairllc@gmail.com
Address 20012		Email Address
License #		
Plumbing Contra	ctor Informatio	
Description of Work plumbing		_# Baths ^{2.1}
Larry Lee Plumbing		910 635 7004
Plumbing Contractor's Company Name		Telephone
7051 CREST STREET FAYETTEVILLE NC 28306		service.lps@yahoo.com
Address 05274		Email Address
License #		
Insulation Contra	ctor Informatio	o <u>n</u> 910 308 1534
Southeastern Construction of Rockfish LLC		
Insulation Contractor's Company Name & Address		Telephone

*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.

Gotloop verified 08/16/24 10:12 AM EDT JUIS-MVSL-U1MR-XGBF			
Signature of Owner/Contractor/Officer(s) of Corporation Date			
Affidavit for Worker's Compensation N.C.G.S. 87-14			
The undersigned applicant being			
theGeneral 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. Gelfrey Wright Gottoop verified GB/In/C24 10:12 AM EDT JIII0-ON/7A-ULITM-JLMO Date:			
General Contractor			