

Application #	
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* 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

Application for Flooring Building and Flooring		
Owner's Name: Mistil United Enterprises LC Site Address: 471 Wade Stewart in ; hilling	Date $\frac{9/25/34}{100}$ Phone $\frac{9/9}{524-0564}$	
Subdivision: na	Lot na	
Description of Proposed Work: Residence	_ Total Job Cost <u>\$ 300,000</u>	
General Contractor Information		
Christia Unibrosion Enterprises LC	(919) 524-0564	
Building Contractor's Company Name	Telephone	
2117 Sherill Johnson Rd Lillington	Christie echristie yar brough. com Email Address	
Address NC 27546		
L.85934 HEATED SQ FT 1992 GARAGE SQ	FT.5.54	
License # Electrical Contractor Information /		
Description of Work Kladential Electrical Service Size:	Amps T-Pole: Yes No	
matry's Electrical service clac.	(919) 868-6012	
Electrical Contractor's Company Name	Telephoné	
731 Maby Rd, Angie NC 27501 Address	iohnie emabryelectrica). am Email Address	
U.15077	Email Address	
License #		
Mechanical/HVAC Contractor Information		
Description of Work Residential HVAC	<u> </u>	
JEM Heating & Air Condition Co. Inc.	(910)897-5501	
Mechanical Contractor's Company Name	Telephone	
724 Jurlington Rd. Dunn NC 28334	andmhvace contraglink, net Email Address	
Address L-17164	Email Address	
License #		
Plumbing Contractor Information		
Description of Work Residential Plumbring	# Baths	
Nouble J Plumbing, LLC	(910)814-7705	
Plumbing Contractor's Company Name	Telephone	
614 Byrd St. Burnlevel NC 28323	iamie johnson plumbing egmai Email Address	
Address L. 21049	Email Address	
L. 21649 License #		
Insulation Contractor Information		
live Green 5001 old Prole Rd Raleigh W.	(919) 453 - 6411	

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

27610

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.

Signature of Owner/Contractor/Officer(s) of Corporation

carrying out the work. .

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