

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

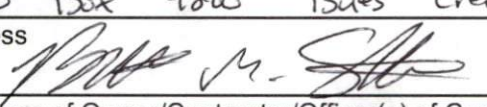
Application # _____
 Harnett County Central Permitting
 PO Box 65 Lillington, NC 27546
 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

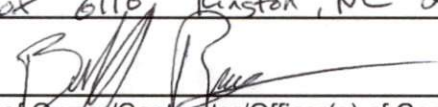
Owner's Name: Campbell University Date: 11-13-18
 Site Address: 260 Leslie Campbell Ave Lillington, NC Phone: 910-893-1610
 Description of Proposed Work: _____

General Contractor Information: Building Cost \$ 3,500.00

SEC, LLC
 Building Contractor's Company Name
PO Box 4000 Buies Creek, NC 27506
 Address

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

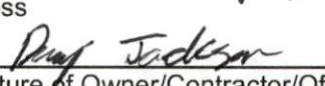
910-893-8486
 Telephone
bretts@si-nc.com
 Email Address
62649
 License #

Electrical Contractor Information: Electrical Cost \$ 2,500.00

Description of Work _____ Service Size: _____
Triple-R Electric, Inc
 Electrical Contractor's Company Name
PO Box 6116 Kinston, NC 28501
 Address

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

252-523-3558
 Telephone
whouse@tripler.com
 Email Address
13241-U
 License #

Mechanical Contractor Information: Mechanical Cost \$ 1,500.00

Description of Work _____
Jackson + Sons
 Mechanical Contractor's Company Name
2330 Indian Springs Road Dudley, NC 28333
 Address

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

Units _____
919-658-5054
 Telephone
slc@jacksonandsons.com
 Email Address
10557
 License #

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____
 Plumbing Contractor's Company Name
 Address
 Signature of Owner/Contractor/Officer(s) of Corporation

Telephone
 Email Address
 License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address

Telephone

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

Sprinkler Contractor Information

Crossroads Fire Protection, Inc
Sprinkler Contractor's Company Name 919-207-3855
Telephone

809 South Market Street Benson, NC 27504
Address j.nitcher@crossroadsfire.net
Email Address

John W. II
Signature of Officer(s) of Corporation 147554
License #

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____
Telephone

Address _____
Email Address

Signature of Officer(s) of Corporation _____
License #

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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 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 charged at full price per current fee schedule.

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation 11-13-18
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: [Signature] UP Date: 11-13-18