

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 # <u>BCOM 1908-000</u>

Harnett County Central Permitting
PO Box 65 Lillington NO 27540

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: Dawson	5 Prop	erties	 Da	te:	
Site Address: 280	Tarco Pr	Fuguery Vani	~ WC 27526 Phone:	919-201-3841	
Description of Proposed Work:	Commerc	cal buildin	ς	,	
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Description of Proposed Work: Commercial building	
General Contractor Information: Building Cost \$	(30,000
Dawsons Construction	(919) 552-0246
Building Contractor's Company Name	Telephone
604 Cotton Rd	tow ndcoop11380 e) amail.an
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Electrical Contractor Information: Electrical Cost \$	License #
Description of Work <u>Electrical Per Plan</u> Service Size: 700	<u> </u>
Dawsons Electric	919 552 0246
Electrical Contractor's Company Name	Telephone
III E Vance St. Fuguary	MIKKIE dausons electric con
Address	Email Address
J1 / 1	25948-L
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Mechanical Contractor Information: Mechanical Co	st \$
Description of Work Plan	# Units
SC'S Heat + Hir	919-369-2657
Mechanical Contractor's Company Name	Telephone
1539 Wade Stephenson Rd 27540	JCShvac Egmail. Com
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	H-3 12655
Plumbing Contractor Information: Plumbing Cost \$	License # 6500.00
Description of Work Install Plumbing Per Plan	
	919-669-4650
Plumbing Contractor's Company Name	Telephone
1359 Fuguary Varina, NC 27526	Candensplumbing - Qaol-Cov Email Address 18903 classification Pl
Address	Email Address
faul (ander	18903 classification Pl
Signature of Owner/Contractor/Officer(s) of Corporation	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				
Sprinkler Contractor's Company Name	Telephone			
Address	Email Address			
Signature of Officer(s) of Corporation License # Fire Alarm Contractor Information				
				
Fire Alarm Contractor's Company Name	Telephone			
Address	Email Address			
Signature of Officer(s) of Corporation	License #			
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit?YesNo				
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 of Owner/Contractor/Officer(s) of Corporation	Date 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:	Date: 8/12/19			
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