



bc.com 1912.0002
ecom 1912.0003

*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

2006
Neighbors
Road

Owner's Name: SQF, LLC Date: 11/20/19

Site Address: PROW IN THE VICINITY OF 1722 NEIGHBORS ROAD, DUNN Phone: 207-358-0008

Description of Proposed Work: CONSTRUCTION OF A NEW UTILITY POLE WITH A WIRELESS ANTENNA

General Contractor Information: Building Cost \$ 25,000

TILSON TECHNOLOGY MANAGEMENT (251)455-7610

Building Contractor's Company Name Telephone

16 MIDDLE STREET 4TH FLOOR, PORTLAND ME 04101 JHENDERSON@TILSONTECH.CO

Address Email Address

Curtis "John" Henderson 78031

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

Electrical Contractor Information: Electrical Cost \$ 3,000

Description of Work INSTALLATION OF WIRELESS Service Size: _____ Amps #T-Poles _____

DEGLER ENTERPRISE INC 888-690-7384 919 210 8442

Electrical Contractor's Company Name Telephone

168 RIVERBIRCH WAY, CLAYTON NC 27520 415 Spauld CHRIS@DEGLERINC.COM

Address Email Address

Donald Williams 28436

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

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work N/A # Units _____

Mechanical Contractor's Company Name Telephone

Address Email Address

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

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work N/A # Baths _____

Plumbing Contractor's Company Name Telephone

Address Email Address

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

Insulation Contractor Information

N/A Telephone

Insulation Contractor's Company Name & Address Telephone

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



Sprinkler Contractor Information

N/A

Sprinkler Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Officer(s) of Corporation _____ License # _____

Fire Alarm Contractor Information

N/A

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.

Curtis "John" Henderson
Curtis "John" Henderson (Nov 20, 2019)

Nov 20, 2019

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

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: Mawson Appius

Division Counsel

Date: Nov 25, 2019









2019-11-20 BP Erwin East_Harnett County

Final Audit Report

2019-11-22

Created:	2019-11-20
By:	Elizabeth Rancourt-Smith (erancourt-smith@tilsontech.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAABVD_iH2Aox4KroOBh4Ix451RuUZiKKejp

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2019-11-20 - 5:30:42 PM GMT - IP address: 66.231.197.142
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2019-11-20 BP Erwin East_Harnett County - signed

Final Audit Report

2019-11-25

Created:	2019-11-25
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Status:	Signed
Transaction ID:	CBJCHBCAABAAECVP-Yp8Sp-mgeHbFKDAY_Oo9913_6h7

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