



*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: Isaq Naimce Date: 4-30-21
Site Address: 16 East Washington Street Coatr, NC 27501 Phone: 919-422-5171
Description of Proposed Work: Putting Office Building

General Contractor Information: Building Cost \$ 21,700.00

Isaq Naimce
Building Contractor's Company Name
8501 Averell Ct Raleigh, NC 27615
Address

919-422-5171
Telephone
Isaq36@yahoo.com
Email Address

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

License #
2500

Electrical Contractor Information: Electrical Cost \$ _____

Description of Work Lights, outlets, power Service Size: 100
Triple Crown Electric LLC
Electrical Contractor's Company Name
313-C US HWY 70 E Garner NC 27529
Address

Amps #T-Poles _____
(919) 414-6285
Telephone
triplecrownelectric@gmail.com
Email Address
32141

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

License # _____

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____
Mechanical Contractor's Company Name _____
Address _____

Telephone _____
Email Address _____

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

License # _____

Plumbing Contractor Information: Plumbing Cost \$ 2,000.00

Description of Work Sewer/water/Bathroom plumbing
On Demand Plumbing
Plumbing Contractor's Company Name
1828 Hockaday Rd Four Oaks N.C.
Address

Baths -1-(1toilet/1sink)
919-632-7536
Telephone
heracioflores74@gmail.com
Email Address
33457 (P-1)

[Signature]
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 #

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 of Owner/Contractor/Officer(s) of Corporation

Date

4/30/2021

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: _____

Owner

Date: _____

4/30/2021