

*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

Application for Building and Trades Permit

Owner's Name: Willis H. Gregory Date: 1-6-21

Site Address: 3627 Benson Rd, Angier NC 27501 Phone: 919-669-4679

Description of Proposed Work: _____

General Contractor Information: Building Cost \$ _____

Willis H. Gregory Building Contractor's Company Name Telephone 919-669-4679

3581 Benson Rd, Angier NC 27501 Address Email Address WGregory50112@gmail.com

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

Electrical Contractor Information: Electrical Cost \$ _____

Description of Work rewired bldg Service Size: 400 Amps #T-Poles _____

RA Gregory Electric Electrical Contractor's Company Name Telephone 910-984-6932

1948 UNC Hwy 27 Lillington NC 27546 Address Email Address _____

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

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

n/a 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 _____ # Baths 1

Willis H. Gregory Plumbing Contractor's Company Name Telephone 919-669-4679

3581 Benson Rd, Angier NC Address Email Address _____

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

Insulation Contractor Information

Willis H. Gregory Insulation Contractor's Company Name & Address Telephone 919-669-4679

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

Sprinkler Contractor Information

WJA
 Sprinkler Contractor's Company Name _____ Telephone _____
 Address _____ Email Address _____
 Signature of Officer(s) of Corporation _____ License # _____

Fire Alarm Contractor Information

WJA
 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.

Willa Beatty
 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: Willa Beatty _____ Date: _____