

*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: Timmy Hickman/ Olivia Presbyterian Church	Date: 2/20/22
Site Address: 3363 Olivia Presbyterian Church	Phone: 919-499-7783
Description of Proposed Work: Installing a Handicap Ramp at the back	of church. Side facing the Rd.
General Contractor Information: Building Cost \$	
Timmy Hickman	919-499-7783
Building Contractor's Company Name	Telephone
3363 Olivia Rd. Sanford, NC 27332	dhickman919@ windstream.net
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation <u>Electrical Contractor Information:</u> Electrical Cost S	License #
Description of Work Service Size:	Amps #T-Poles
NA	
Electrical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Co	License #
Description of Work	_# Units
NA	7 22 2
Mechanical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost \$	License #
Description of Work	# Baths
NA	
Plumbing Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
NA	The Branch
Insulation Contractor's Company Name & Address	Telephone

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



Sprinkler Contractor Info	rmation
Sprinkler Contractor's Company Name	Telephone
Address	Email Address
Signature of Officer(s) of Corporation Fire Alarm Contractor Info	License #
NA 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 Drive	
I hereby certify that I have the authority to make necessary appl and that the construction will conform to the regulations in the Mechanical codes, and the Harnett County Zoning Ordinance. Contractors is correct as known to me and if <u>any</u> changes occur number of bedrooms, building and trade plans, Environmental Hechanges, I certify it is my responsibility to notify the Harnett Coulany and all changes. Expired Permit Fees - 6 months to 2 years permit re-issue fee is is charged at full price per current fee schedule.	le Building, Electrical, Plumbing and I state the information on the above including listed contractors, site plan, ealth permit changes or proposed use inty Central Permitting Department of
A my Wyd	3-20-22
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compensate The undersigned applicant being the: General Contractor Owner Officer/a Do hereby confirm under penalties of perjury that the person(s), fire	Agent of the Contractor or Owner
set forth in the permit:	ระทางเรียนลาสเซ็าหามละเนา กามสะเนา
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 withem.	vorkers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their own provering themselves.	policy of workers' compensation insurance
Has no more than two (2) employees and no subcontractor	rs. British
While working on the project for which this permit is sought it is under Department issuing the permit may require certificates of coverage to issuance of the permit and at any time during the permitted work carrying out the work.	e of worker's compensation insurance prior rk from any person, firm or corporation
Sign w/Title: X mm	Date: 3/20/22