

Application # _____

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: KENDALL GREMSLEY	Date 8 13 202
Site Address: 641 OAKREDEE DUNCAN ROAD	Date 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Subdivision: 00502 - BUCKHORN RURAL	Phone (919) 621- 297
Subdivision: 00502 - BOOKHORN FOILTC	Lot
Description of Proposed Work: METAL GARAGE ADDITION	,
General Contractor Informa	
AMERICAN DREAM BASEBALL Building Contractor's Company Name	(919) 621-2992
1404 WESLYN SPRINGS WAY	Telephone MRS. GALMSLEY @ YAHOO. CO.
Address	Email Address
IN - 83 - 2909833 HEATED SQ FT GARAGE	ESQFT 550 (22×25)
Description of Work Service Si	ize:Amps T-Pole:YesNo
Electrical Contractor's Company Name	Telephone
Address	Email Address
License #	
Mechanical/HVAC Contractor Inf	formation
Description of Work	
Machanical Contractor's Comment	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License #	
Plumbing Contractor Informa	ation
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	atte.
Insulation Contractor Informa	ation
Insulation Contractor's Company Name & Address	Telephone

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



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 that by signing below I have obtained all subcontractors permission to obtain these permits 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 as per current fee schedule.

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

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
Sign w/Title:

Garage Installer Information

Description of Work: Design, Deliver and Install Garage on Property

Company Name: Five Star Metal Buildings

Telephone: (844) 308-9705

Address: 777 W. Lebanon St. Mt. Airy, NC 27030

Website: //www.fivestarmetalbuildings.com