

\*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.hamett.org/permits
COMMERCIAL

Application for Building and Trades Permit				
Owner's Name: Roy and Phonea Haranda	Date:			
Site Address: Patern Roal	Phone:			
Description of Proposed Work: But 3 Sink St				
General Contractor Information: Building Cost \$  Consolidate Forth Screek  Building Contractor's Company Name,  101 Professional Cond Gave NC 27529  Address  Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Contractor Information: Electrical Cost \$  Description of Work Service Size:	Telephone  Mch & peme - bost.com  Email Address  66583  License #			
Electrical Contractor's Company Name	Telephone			
Address	Email Address			
Signature of Owner/Contractor/Officer(s) of Corporation  Mechanical Contractor Information: Mechanical Cost	License #			
Description of Work	# Units			
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			
Plumbing Contractor's Company Name	Telephone			
Address	Email Address			
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

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Sprinkler Contractor Information				
Sprinkler Contractor's Company Name	Telephone			
Address	Email Address			
Signature of Officer(s) of Corporation Fire Alarm Contractor Info	License #			
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	way Access/Permit? Yes No			
I hereby certify that I have the authority to make necessary appliand 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 any 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 ponths to 2 years permit re-issue fee it is charged at full price of current fee schedule.	te Building, Electrical, Plumbing and I state the information on the above including listed contractors, site plan, ealth permit changes or proposed use unty Central Permitting Department of			
with no	11/9/2022			
Signature of wner/Contractor/Officer(s) of Corporation	Date			
Affidavit for Worker's Compensate The undersigned applicant being the:	tion N.C.G.S. 87-14			
General Contractor Owner Officer/Agent of the Contractor or Owner				
Do hereby confirm under penalties of perjury that the person(s), f set forth in the permit:	firm(s) or corporation(s) performing the work			
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.				
TAZÍ				
covering themselves.	policy of workers' compensation insurance			
covering themselves.	ors. Inderstood that the Central Permitting			