

\*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/

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Building and Trades Permit Owner's Name: Mario and Beyerty Scott Site Address: 1794 Old Stage 'K Description of Proposed Work: Metal bldg w Concrete floor General Contractor Information: Building Cost \$ /5,000 Stand Sun Cle ton Homes
Building Contractor's Company Name 910-890-6870 POBOX 1072 Coats NE **Email Address** 70922 Signature of Owner/Contractor/Officer(s) of Corporation Electrical Contractor Information: Electrical Cost \$ \_\_\_\_\_\_\_ 650.00

k Raugh d + rim \_\_\_\_\_\_ Service Size: 200 Amps #T-Poles Electrical Contractor's Company Name ignature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Cost \$ # Units Description of Work Mechanical Contractor's Company Name Telephone **Email Address** Address Signature of Owner/Contractor/Officer(s) of Corporation License # Plumbing Contractor Information: Plumbing Cost \$\_\_\_ Description of Work # Baths Plumbing Contractor's Company Name Telephone **Email Address** 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



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 #
<b>Driveway Access</b> - NC Department of Transportation	tion Driveway Access/Permit? Yes No
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 <a href="mailto:any">any</a> 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	
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 the covering themselves.	neir own policy of workers' compensation insurance
Has no more than two (2) employees and no sub	contractors.
While working on the project for which this permit is sound Department issuing the permit may require certificates of to issuance of the permit and at any time during the permit carrying out the work.	f coverage of worker's compensation insurance prior
Sign w/Title: Chal Onder	Date: 1-44 24