



Initial Application Date:	Application #		
	DRB # CU #		
COUNTY	COMMERCIAL OF HARNETT LAND USE APPLICATION		
Central Permitting (Physical) 108 F. Front Street, Lillington, NC 27546 (Mailing) F.	O Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits		
	Mailing Address: 2940 Arrowlead Rd.		
City: Dura State: NC Zip: 28	334 Contact # Email:		
APPLICANT: Vuncamon Contracting	Mailing Address: 6520 Vilshie Dr.		
*Please fill out applicant information if different than landowner	Mailing Address: 6520 Vilstia Dr.  526 Contact # Davel 9198684923 Email: ducontracting 00 egnalicon		
CONTACT NAME APPLYING IN OFFICE:	Phone #		
Address:	PIN:		
Deed Book Page: /			
PROPOSED USE:			
☐ Multi-Family Dwelling No. Units: No. B	edrooms/Unit:		
Business Sq. Ft. Retail Space:Type:	# Employees: Hours of Operation:		
Daycare # Preschoolers: # Afterschoolers	oolers:# Employees: Hours of Operation:		
☐ Industry Sq. Ft: Type:	# Employees: Hours of Operation:		
Church Seating Canacity:	# Bathrooms: Kitchen:		
Church Seating Capacity.			
Accessory/Addition/Other (Size 35 x 65) Use: Dunpster Shelter			
Water Supply: County Existing Well New Well (# of dwellings using well) *Must have operable water before final			
(Need to Complete New Well Application at the same time as New Tank)			
Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer  (Complete Environmental Health Checklist on other side of application if Septic			
Comments:			
	aws of the State of North Carolina regulating such work and the specifications of plans submitted.		
I hereby state that foregoing statements are accurate and correct	t to the best of my knowledge. Permit subject to revocation if false information is provided.		
D. 011_	8/13/24		
Signature of Owner or Owner	r's Agent Date		

\*\*This application expires 6 months from the initial date if permits have not been issued\*\*

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

\*\*\*It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\*

\*This application expires 6 months from the initial date if permits have not been issued\*



\*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

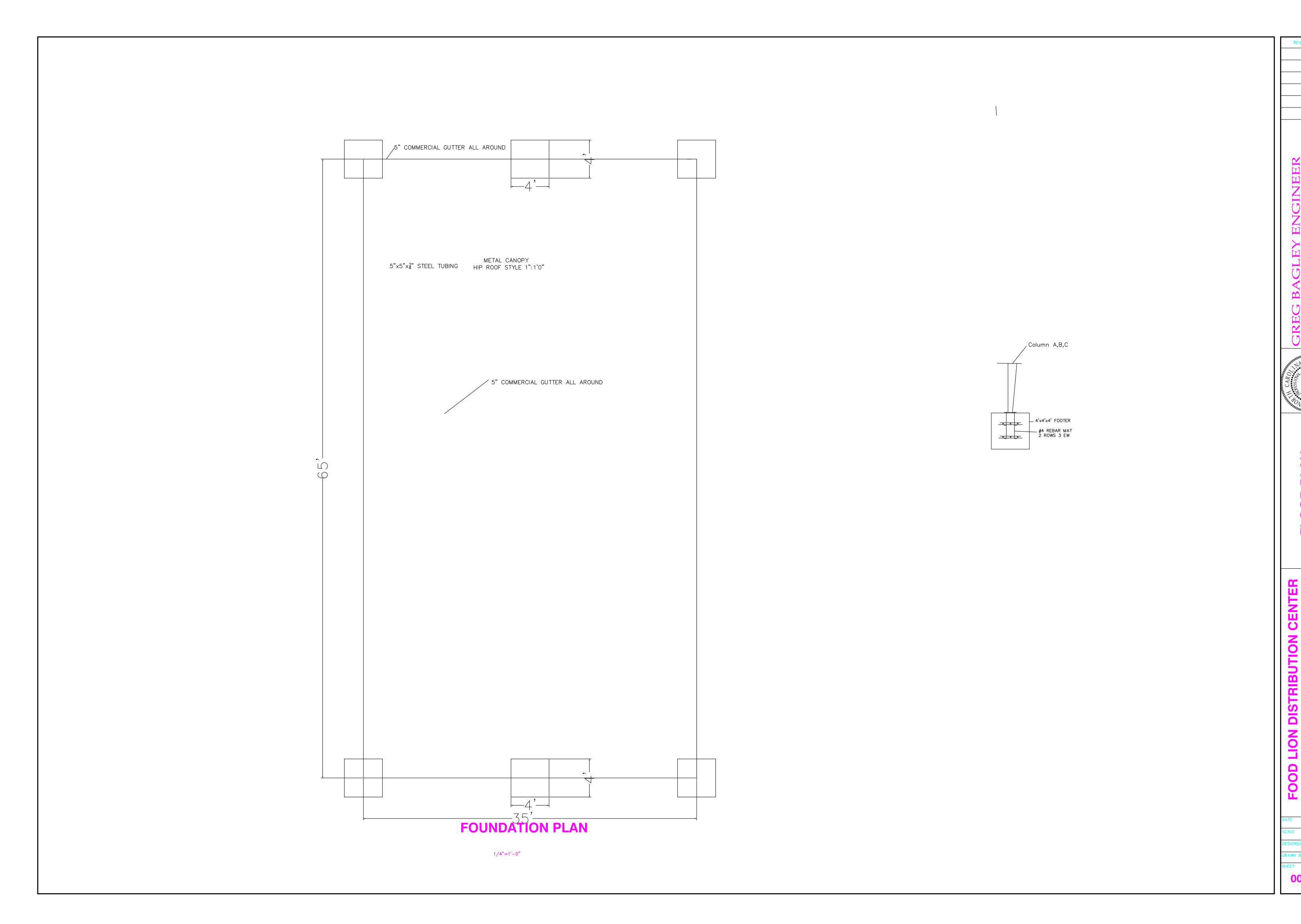
COMMERCIAL

Application for Building and Trades	Permit , ,
Owner's Name: Del Haze USA	Date: 8/13/2024
Site Address: 2940 Acrowled Rd. Dun NC 28	334 Phone:
Description of Proposed Work: 35×65 Damps Ler SLel	w
General Contractor Information: Building Cost \$	100,000
Vuncamon Contracting	9198684923
Building Contractor's Company Name	Telephone
6520 Vilshine Dr. Fuguy Vame NC 2756	Email Address
Address	
Dell	59937
Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Contractor Information: Electrical Cost S	License #
Description of Work Service Size:	Amps #T-Poles
	Tolonhono
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
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



Sprinkler Contractor Information		
Sprinkler Contractor's Company Name	Telephone	
Address	Email Address	
Signature of Officer(s) of Corporation	License #	
Fire Alarm Contractor Informati	<u>on</u>	
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 <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 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: Delle Duw	Date: 8/13/24	





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