*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 #_

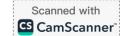
Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.hamett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Olivia Evangelical Presbyterican Cl	(VISCO 1 2
Site Address: 3363 Olivia Road Sandford, NC 27	
Directions to job site from Lillington: 27 West to Olivia	200d
	Variable
Subdivision:	Lot:
Description of Proposed Work: CrawSpace encapsuation	f floor stabilization
Heated SF 10,347 Unheated SF General Contractor Information: Building Cost	\$ 155,521.24
Vanterra Foundation Solutions dba 58 Foundations Building Contractor's Company Name	
Address	nlane@68foundations.Co Email Address
Nikkis Bans	88162
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Electrical Contractor Information: Electrical Contr	st \$ a· Amps #T-Poles
Service dize	y
Electrical Contractor's Company Name	Telephone
Address Commons and	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical	License # I Cost \$
Description of Work	지금 (- 기가 시간에 기급했다면 12 20 20 - 20 2
It is hereby continued bases penalties of herbits and anti-alitismus, rate	(a) an employed from the land and a
Mechanical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Co	License #
Description of Work	# Baths
No.	Telephone
Plumbing Contractor's Company Name	Тејернопе
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Informatio	<u>n</u>
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 Fire Alarm Contractor Info	License #	
The Alain Contractor into	mation	
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 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 <u>any</u> 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.		
nierio Lane	1/18/2025	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	
Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation The undersigned applicant being the:	Date	
Affidavit for Worker's Compensat	Date	
Affidavit for Worker's Compensation of the undersigned applicant being the:	Date tion N.C.G.S. 87-14 Agent of the Contractor or Owner	
Affidavit for Worker's Compensate The undersigned applicant being the: General Contractor Owner Officer/ Do hereby confirm under penalties of perjury that the person(s), f	Date tion N.C.G.S. 87-14 Agent of the Contractor or Owner irm(s) or corporation(s) performing the work	
Affidavit for Worker's Compensation The undersigned applicant being the: General Contractor Owner Officer/ Do hereby confirm under penalties of perjury that the person(s), for set forth in the permit:	Date tion N.C.G.S. 87-14 Agent of the Contractor or Owner irm(s) or corporation(s) performing the work rs' compensation insurance to cover them.	
Affidavit for Worker's Compensate The undersigned applicant being the: General Contractor Owner Officer/ Do hereby confirm under penalties of perjury that the person(s), for set forth in the permit: Has three (3) or more employees and has obtained worke Has one (1) or more subcontractors(s) and has obtained workers.	Date tion N.C.G.S. 87-14 Agent of the Contractor or Owner irm(s) or corporation(s) performing the work rs' compensation insurance to cover them. workers' compensation insurance to cover	
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Affidavit for Worker's Compensation The undersigned applicant being the: General ContractorOwnerOfficer Do hereby confirm under penalties of perjury that the person(s), if set forth in the permit: Has three (3) or more employees and has obtained worked them. Has one (1) or more subcontractors(s) and has obtained worked them. Has one (1) or more subcontractors(s) who has their own covering themselves. Has no more than two (2) employees and no subcontractor While working on the project for which this permit is sought it is under the permit may require certificates of coverage to issuance of the permit and at any time during the permitted working on the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permitted working the permit and at any time during the permit and at any time at any time at any time at any	Agent of the Contractor or Owner firm(s) or corporation(s) performing the work rs' compensation insurance to cover them. Workers' compensation insurance to cover policy of workers' compensation insurance to cover policy of workers' compensation insurance ors. Inderstood that the Central Permitting per of worker's compensation insurance prior rk from any person, firm or corporation	

