

(Change of Use)
COMMERCIAL BUILDING APPLICATION

CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

Site Address: 4318 Raelyd PIN: 0505-72-5588
Owner: Louis Donald Horton Phone: 9105802716 Email: —
Description of Proposed Work: Change of Use Total Job Cost: \$ —

 GENERAL CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

10,000
General Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____ Signature of Owner/Contractor/Officer of Corp. _____ \$ _____
Building Cost (excluding trades)

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: _____ Service Size: _____ Amps T-Poles: YES NO
Electrical Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____ Signature of Owner/Contractor/Officer of Corp. _____ \$ _____
Electrical Cost

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: _____ # of Units: _____
Mechanical Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____ Signature of Owner/Contractor/Officer of Corp. _____ \$ _____
Mechanical Cost

 PLUMBING CONTRACTOR INFORMATION

Description of Work: _____ # of Baths: _____
Plumbing Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____ Signature of Owner/Contractor/Officer of Corp. _____ \$ 350.00
Plumbing Cost

REFRIGERATION CONTRACTOR INFORMATION

Refrigeration Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____ Signature of Owner/Contractor/Officer of Corp. _____



SPRINKLER CONTRACTOR INFORMATION

Sprinkler Contractor's Company Name	Phone
Address	Email
License #	Signature of Owner/Contractor/Officer of Corp.

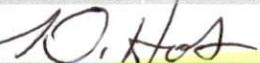
FIRE ALARM CONTRACTOR INFORMATION

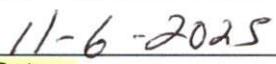
Fire Alarm Contractor's Company Name	Phone
Address	Email
License #	Signature of Owner/Contractor/Officer of Corp.

Driveway Access - NC Department of Transportation Driveway Access/Permit? YES NO

I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.


Signature of Owner/Contractor/Officer of Corp.


Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

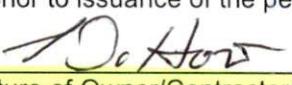
The undersigned applicant being the:

General Contractor Owner Officer/Agent of the Contractor or Owner

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- Has 3 or more employees and has obtained workers' compensation insurance to cover them,
- Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,
- Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,
- Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.


Signature of Owner/Contractor/Officer of Corp.


Date