

Application #3RES 1908 -0010

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit** 

on on license.	-1.10	
Owner's Name: David Payne	Date: 8/24/9	
Owner's Name: David Payne Site Address: 373 Avery Pond Or Figury Varing Subdivision: Avery Pond Or Figury Varing	NC 77516hone: 919-606-2415	
Subdivision: Avery Pond	Lot:	
Description of Proposed Work: Build Storage Building		
General Contractor Information		
Cardinal Buildings LLC	919-771-2833	
Building Contractor's Company Name	Telephone	
1641 US 70 Hwy Buisness Gamer, NL 27529		
Address	Email Address	
License #		
Electrical Contractor Information		
Description of Work Service Size: _	Amps T-Pole:YesNo	
Electrical Contractor's Company Name	Telephone	
Address	Email Address	
Address	Linai Address	
License #		
Mechanical/HVAC Contractor Information	<u>ation</u>	
Description of Work		
	,	
Mechanical Contractor's Company Name	Telephone	
Address	Email Address	
Addless	Email Address	
License #		
Plumbing Contractor Information		
Description of Work	_# Baths	
/		
Plumbing Contractor's Company Name	Telephone	
	= "	
Address	Email Address	
License #		
Insulation Contractor Information	<u>n</u>	
Insulation Contractor's Company Name & Address	Telephone	

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.



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 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 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 as per current fee schedule.

Signature of Owner/Contractor/Officer(s) of Corporation

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Affidavit for Worker's Compensation N.C.G.S. 87-14		
The undersigned applicant being the:		
General Contractor Owner Officer/A	gent 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:	Date:	