

Application # _____

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

tion on license.	1.1.20
Owner's Name: Josephan K. Bethure	Date:
Owner's Name: Janathan R. Bethure Site Address: 3032 Hung 401 5. Listington	n N 27546 Phone: 910-890-003-8
Subdivision:	Lot:
Subdivision:	Total Job Cost: 25000
Homeowner General Contractor Infor	
Building Contractor's Company Name	Telephone
Address	Email Address
Description of Work Homeowner Electrical Contractor Info Service	Email Address President Control of Control
Electrical Contractor's Company Name	Telephone
Address	Email Address
License # Mechanical/HVAC Contractor	Information MRES2001-006
Description of Work	TYLCE SOLE
Homeower Jan	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License # Plumbing Contractor Infor	rmation PRS 200 1-000
Description of Work	# Baths
Homeower In	-
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	1RES2001-000
frameswhe D	2 4
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.

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.		
Cfa	1/2/2019	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	
Affidavit for Worker's Compension The undersigned applicant being the:	sation N.C.G.S. 87-14	
General Contractor Owner Office	cer/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 Department issuing the permit may require certificates of cove to issuance of the permit and at any time during the permitted carrying out the work.	erage of worker's compensation insurance prior	
Sign w/Title:	Date:	

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Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of Structure: Jonathan R. Bethune	Phone: 910-890-0028
Owner (s) Mailing Address: 183 Tile Whers	
Santold, NC 27532	
Land Owner Name (s): Jonathan R. Bothure Construction or Site Address: 3032 Huly 4015.	Phone: 910-892-0028
Construction or Site Address: 3032 Huly 401 5	l'Mayton per 27546
PIN # Parcel #	
Job Cost:	upstair bonus room
Mechanical: New Unit With Ductwork New Unit Without Ductwork	ork Gas Piping Other
Electrical*: 200 Amp Service Change Service For Progress Energy customers we need the premise	vice Reconnect Other number
Plumbing: Water/Sewer Tap Number of Baths	Water Heater
Specific Directions to Job from Lillington: Hwy 4015 approximately 3 m	Tes on right.
Subdivision:Lot #	<i>t</i> :
(Contractors Name) will provide the (Traction the building curper or my NC state license number is	
I am the building owner or my NC state license number is	
perform such work on the above structure legally. All work shall comp	by with the State Building Code and all
other applicable State and local laws, ordinances and regulations.	
Contractor's Company Name	Telephone
Address	Email Address
License #	11
Structure Owner / Contractor Signature:	Date:/>/>/>ocg
By signing this application you affirm that you have obtained permission	on from the above listed license holder to

purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.