

Application #

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

Application for Residential Building and Trades Permit

on on Ilcense.	
Owner's Name: John Jones + Loni Jones Sile Address: 176 Friendship In., Erwin, NC 283	Date: <u>05/21/2</u> 0
Sile Address: 176 Friendship In., Erwin, NC 283	139 Phone: 910-591-7707
Subdivision: N/A	Lot:
Subdivision: N/A Description of Proposed Work: Metal harse barn 18x34	Total Job Cost: #5107.99
General Contractor Information	
LC Contracting LC	336-415-4771
Building Contractor's Company Name	Telephone
737 South Main Street Mount Airy NC Address 27020	<u>AShleigh@Iccontracting</u> IIc.Com Emall Address
Address 27030 79548	Email Address J
License #	
Electrical Contractor Informatio	<u>n</u>
Description of Work Service Size:	Amps T-Pole:YesNo
Electrical Contractor's Company Name	Telephone
	•
Address	Email Address
License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work	
Mechanical Contractor's Company Name	Telephone
Address	
Address	Email Address
License #	
Plumbing Contractor Information	<u>n</u>
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Address	
Address	Emall Address
License #	
Insulation Contractor informatio	<u>n</u>
Insulation Contractor's Company Name & Address	Telephone
	roiculuud

*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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> 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 as per current fee schedule.

	Affidavit	for Worker's (Compensation N.	C.G.S. 87-14	
	dersigned applicant being				
<u>X</u>	_ General Contractor	Owner	Officer/Agent of	the Contractor or Owner	
Do here set fort	eby confirm under penaltie h in the permit:	s of perjury that th	e person(s), firm(s) or	corporation(s) performing the work	
<u>X</u> :	Has three (3) or more emp	loyees and has ob	otalned workers' comp	ensation insurance to cover them.	
them.	Has one (1) or more subco	ontractors(s) and h	as obtained workers'	compensation insurance to cover	
coverin	Has one (1) or more subco g themselves.	ontractors(s) who h	nas their own policy of	workers' compensation insurance	
,,	Has no more than two (2)	employees and no	subcontractors.		
Departi to issua carryina	ment issuing the permit ma ance of the permit and at a a out the work	ay require certificat ny time during the	les of coverage of wor	d that the Central Permitting ker's compensation insurance prior any person, firm or corporation	
Sign w	Tille: fust	: per		Date: 05 24 2020	