

Application # BIRES 200

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

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

name & phone must match information on license.	Application for Residential E	Building and Trades Permit
Owner's Name:	THEND IL	03/16
Site Address: 59	JOE Callins Par	Date: 07/07/3
Subdivision:	SOLINS NOBIL	Phone: <u>919-931-3</u>
Description of Proposed	Work: R340DZLING	Lot:Total Job Cost: \$7,000
		or Information
Building STANG A	1111	919-831-3100
Building Contractor's Con	npany Name	Telephone
Address	ES LANE, CARY, N.C. :	27511
	,	Email Address
License #		
Description of Work RE ENERGY ELECTRI	Modal (NG Some	r Information ervice Size: Zoo Amps T-Pole:YesNo
Electrical Contractor's Con	npany Name	919-413-5274 Telephone
Address	ICAN RODD, APEX, NC.	27502 M35944 @ laffrouth mat
22667-1	,	Email Address
License #		
Description of Work	Mechanical/HVAC Contrac	ctor Information
Mechanical Contractor's Co		
Contractor's Co	npany Name	Telephone
Address		
		Email Address
License #		Ž.
Description	Plumbing Contractor In	formation
Description of Work		# Baths_
Plumbing Contract C	-	" Gaus
Plumbing Contractor's Compa	iny Name	Telephone
Address		
		Email Address
License #		
	Insulation Contractor Info	ormation
Insulation Contractor 2		-
Insulation Contractor's Compar	y 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! 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

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:
Owner Officer/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
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 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: A MU 211 ENG Date: 07/2/2020