

Application # BRES 200 8004

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

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Owner's Name Christopher + No	thatyn Blade	Date	9-	1-2
Site Address: 150 Farrah S	shea way Ana	e NC Phone: 9	19675	284
Subdivision: Brian Kieth M	eadows	Lot:		
Subdivision: Brian Kieth M. Description of Proposed Work: She d		Total Job Cost: == 3	200 - 90	000
1 Constitution	ral Contractor Information			
Building Contractor's Company Name		Telephone	4	_
Address		Email Address		
License #				
Electri	cal Contractor Information	1		
Description of Work	Service Size: _	Amps T-Pole:	Yes	_No
Electrical Contractor's Company Name		Telephone	1	
Address		Email Address		-
License #	I/HVAC Contractor Informa	ation		
Description of Work				
Mechanical Contractor's Company Name		Telephone		-
mosnamour compony mane				
Address		Email Address	4	-
License #	*			
Plumb	ing Contractor Information	1		
Description of Work		_# Baths	1	
Plumbing Contractor's Company Name		Telephone		-
Address		Email Address		-
License #	lian Cantractor Information			
Insulat	tion Contractor Information	ш		
Insulation Contractor's Company Name & Ad	ddress	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 <a href="bysigning-below-I have obtained all subcontractors-bermission to obtain these permits">bermission to obtain these permits</a> and if <a href="mainto-any">any</a> 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

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
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 Vittal - 7-9-20