

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

Application # BRES2009
g/permits

ERES2012-0016

PRES2012-006

* 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

Owner's Name: Larry E. Burks	Date: 12-7-2020
Site Address: 2222 Christian Light Rd.,	Phone: 919 - 480 - 7058
Owner's Name: Larry E. Burks Site Address: 2222 Christian Light Rd., Subdivision: Fugury Varing	NC Lot:
Description of Proposed Work:	_ Total Job Cost: \$50,000
General Contractor Information	
Larry E. Bucks Property owner	919-480-7058
Building Contractor's Company Name	Telephone
2727 Christian Light Ad. Freeze Varing	harry Burks 48@amail.co
General Contractor Information Larry E, Bucks / Property owner Building Contractor's Company Name 2727 Christian Light Rd. Figury Varing Address N.C. 27526	Email Address
License #	_
Description of Work Install Service, Interior Park Service Size:	<u>∏</u> ZooAmps T-Pole: Yes x No
Electrical Contractor's Company Name	616-1180-7058
Electrical Contractor's Company Name	Telephone
	Larry Burks 48@gmail.com Email Address
Address	Email Address
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work	
Machanical Contractor's Company Name	Tologhama
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License #	
Plumbing Contractor Information	<u>n</u>
Description of Work Grandwork, Roughin, Etrin-out	_# Baths
Plumbing Contractor's Company Name	919-482-7058
Plumbing Contractor's Company Name	Telephone
	Larry Burks 48@ gmail. com Email Address
Address	Email Address
License #	
Insulation Contractor Informatio	n
NIA	_
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 bysigning 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.

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: Date: 12-7-20
Sign w/Title: Date: 12-7-20