



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.

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.

Michael Taylor
Signature of Owner/Contractor/Officer(s) of Corporation

10/15/20
Date

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: _____

Mark Jackson - Installer of Pool
919-774-7485



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

Application # _____

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

Application for Residential Building and Trades Permit

Owner's Name: Michael Tyler Date:
Site Address: 386 Wynnridge Drive Angier, N.C. 27501 Phone: 585-430-0001
Subdivision: Wynnridge Lot: 32
Description of Proposed Work: Above ground pool install Total Job Cost: 15,000.00

General Contractor Information

Building Contractor's Company Name Telephone
Address Email Address
License # HEATED SQ FT GARAGE SQ FT

Electrical Contractor Information

Description of Work Install power for pool pump Service Size: 15 Amps T-Pole: Yes No
120VAC, GFCI
Michael Tyler - Home owner Telephone: 585-430-0001
Electrical Contractor's Company Name Address: 386 Wynnridge Drive Angier, N.C. 27501 Email Address: mtyler44@gmail.com

Mechanical/HVAC Contractor Information

Description of Work
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information

Description of Work Install above ground pool (24x54) # Baths 1
Mark Jackson (round) Telephone: 919-774-7485
Plumbing Contractor's Company Name Address: 160 Aagan Rd Sanford, NC 27330 Email Address: wdigit@windstream.net
Address: None Workers Comp # Q892500540 - Eric Insurance
License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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