

Application #

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

## **Application for Residential Building and Trades Permit**

on on license.	0	
Owner's Name:	Wilson	Date: 10-22-202
Site Address: 3008 Pa	wb church Road	Phone: 919 218 0425
Subdivision:		Lot
Description of Proposed Work:	Build a decle	106 COST- 15, 643.00
	General Contractor Information	on J
Genesis Construction	0	919-377-8809
Building Contractor's Company Na	ame	Telephone
1018 Moreisville Bork	way Sute F	genesiscon secución 2016
Address	•	Binail Address
19629 License #		J
Literise #	<b>Electrical Contractor Informat</b>	ion — — —
Description of Work	Service Size	:Amps T-Pole:YesNo
Sauven Trading Co Electrical Contractor's Company N	uc	919-820-1245
Electrical Contractor's Company N	lame	Telephone
Address Pinnacle Midd	e Road	Mason & Sauger Trading.
71102-11 Kal	eigh NC 21603	Linai Address
License #	8 21403	
<u> </u>	Mechanical/HVAC Contractor Info	rmation
Description of Work		
Mechanical Contractor's Company	Name	Telephone
Address		Email Address
Address	0	Littali Address
License #		
	Plumbing Contractor Informat	<u>ion</u>
Description of Work		# Baths
		(a)
Plumbing Contractor's Company	Name	Telephone
Address		
Address		Email Address
License #		ai , a
	Insulation Contractor Informat	tion
		**
Insulation Contractor's Company	Name & Address	Telephone



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

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

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.

Has no more than two (2) employees and no subcontractors.

Sign w/Title:

covering themselves.

is as per current fee schedule.