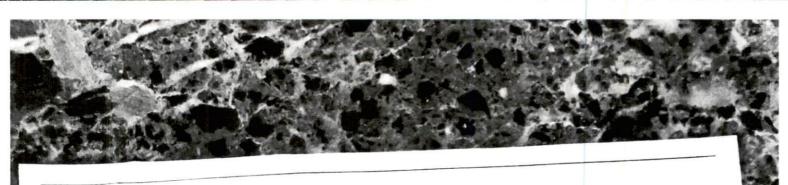
Harnett

Application # Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Each section below to be filled out 910-893-7525 Fax 910-893-2793 www harnett org/permits by whomever performing work Must be owner/occupier or licensed contractor. Address, company Application for Residential Building and Trades Permit name & phone must match information on license. Owner's Name Site Address: Total Job Cost: Description of Proposed Work: Storage building Sheds on each side on site - add General Contractor Information Telephone Contractor's Company Name Carolloresherdogs egrail. GARAGE SQ FT HEATED SQ FT License # **Electrical Contractor Information** Amps T-Pole: ___Yes ___No Service Size: Description of Work _// Telephone Electrical Contractor's Company Name **Email Address** Address License # Mechanical/HVAC Contractor Information Description of Work ___ Telephone Mechanical Contractor's Company Name **Email Address** Address License # Plumbing Contractor Information # Baths Description of Work Telephone Plumbing Contractor's Company Name **Email Address** Address 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.



Harnett

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.

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is as per current fee schedule.
Signature of Owner/Contractor/Officer(s) of Corporation H17121 Date
Affidavit for Worker's Compensation N.C.G.S. 87-14
Affidavit for Worker's Compensation
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 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: Carol a Dlaw owner Date: 417/21