

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. 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.	1 2
Owner's Name: Kathyan SV 16572	Date: 4-14-26
Site Address: 26 Avery Pond Drive	Phone: 919 519-5903
1 12- 1	Lot:
Description of Proposed Work: Wility Shed	Total Job Cost:
General Contractor Information	
Old Hickory Buildings	99331-2027 Telephone Oldhickory buildings. Com
Building Contractor's Company Name	Telephone
1705 Rateigh St.	oldhickory buildings com
Address	Email Address
HEATED SQ FT GARAGE SQ	ET
License #	
Electrical Contractor Information	
Description of Work Service Size:	Amps T-Pole:YesNo
Electrical Contractor's Company Name	Telephone
Address	Email Address
License #	
Mechanical/HVAC Contractor Informa	tion
Description of Work	
Description of Work	
Mechanical Contractor's Company Name	Telephone
Weenanical Contractor's Company Name	relephone
Address	Email Address
Address	Email Address
License #	
Plumbing Contractor Information	
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
, and any any any any	
Address	Email 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.



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.

4-14 ZON

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		
Sign w/Title: Date: 4-14-202		