

Application # _____

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

* Each section below to be filled out 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.	Application for Residential building and the	
Owner's Name: <u>Terr</u>	y Cox	Date:5-25-2021
	-	Phone: 919-770-2941
Subdivision: Not a s		Lot: n/a
Description of Propose	d Work: Replacement of Existing Deck	Total Job Cost: \$2,200.00
	General Contractor Information	
KW Quality Trade	es Inc.	919-901-4085
Building Contractor's C	Company Name	Telephone
	erton Road Kenly NC 27542	<u>kwqualitytrades@gmail.c</u> om
Address		Email Address
license <u>d in NC less than s</u>	<u>\$</u> 30k HEATED SQ FT X GARAGE SC	<mark>≀ FT</mark> _X
License #	Electrical Contractor Information	n
Description of Work	n/a Service Size:	Amps T-Pole:YesNo
		Telephone
Electrical Contractor's	Electrical Contractor's Company Name	
Address		Email Address
Address		
License #	—	
	Mechanical/HVAC Contractor Inform	ation
Description of Work <u>n</u>	/α	
Mechanical Contractor	's Company Name	Telephone
Address		Email Address
Address		Email Address
License #	—	
	Plumbing Contractor Information	<u>n</u>
Description of Work <u>n</u>	/α	_# Baths
Plumbing Contractor's	Company Name	Telephone
Address		Email Address
License #	—	
	Insulation Contractor Information	<u>n</u>
n/a		
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.

Kimberly Woodall President	5-25-2021
Signature of Owner/Contractor/Officer(s) of Corporation	Date
KW Quality Trades Inc.	
Affidavit for Worker's Comper The undersigned applicant being the:	sation N.C.G.S. 87-14
X General Contractor Owner Off	icer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person set forth in the permit:	(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained we	orkers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtain them.	ed workers' compensation insurance to cover
<u>X</u> Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance

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: Kimberly Woodall	President ^{KW Quality}	Trades Inc. Date:	5-25-2021