



Application #

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* 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: David Sears Date _____
Site Address: 666 Fletcher Tubi Rd. Holly Springs NC 27540 Phone 919-278-8056
Subdivision: _____ Lot _____
Description of Proposed Work: addition to kitchen + front porch Total Job Cost 145,000.00

General Contractor Information

Charles Daniel Jarman 919-669-4299
Building Contractor's Company Name Telephone
3590 Coblesbury Rd. Fuquay-Varina NC 27526 dvjarman@gmail.com
Address Email Address
84108 HEATED SQ FT 237 GARAGE SQ FT
License #

Electrical Contractor Information

Description of Work kitchen addition outlets + 15amp Service Size: _____ Amps T-Pole: Yes No
Joseph Michael Fredley 919-390-8954
Electrical Contractor's Company Name Telephone
421 Virgil rd. Durham NC 27703 joseph.fredley@hotmail.com
Address Email Address
32169
License #

Mechanical/HVAC Contractor Information

Description of Work additional supply lines
DRS Services 919-427-0938
Mechanical Contractor's Company Name Telephone
6709 Maggie wood lane Fuquay Varina NC 27526
Address Email Address
16569
License #

Plumbing Contractor Information

Description of Work Sink # Baths 0
Tommy Allen Plumbing 919-649-5117
Plumbing Contractor's Company Name Telephone
8728 Clear Pool Ln Willow Spring NC 27592
Address Email Address
33728
License #

Insulation Contractor Information

Friend's Insulation 919-291-2438
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.

Chris Dan Sawyer

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

8-17-21

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: _____