

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. 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

Application for Residential Building and Trades Permit

The state of the s
Owner's Name: Brian Parkins Date 9-2-21
Site Address: 685 West R. Cameron, NC 28326 Phone 919862 3837
Subdivision:Lot
Description of Proposed Work: Home General on our plumbing Total Job Cost 79,010,14 clerchocal, Sheetock, Cosmetics, Extended and Manual Deck General Contractor Information
Building Contractor's Company Name U253 Paeford Rd, Fay, NC 28304 Building Contractor's Company Name Puilding Contractor's Company Name Building Contractor's Company Name
License #
Description of Work New outlets, Plates, harring Service Size:Amps T-Pole:Yes XNo
Mechanical/HVAC Contractor Information
Description of Work Exaut faun 19 Shower
Mechanical Contractor's Company Name
Address Hope Muline 20348 Email Address Gomand.
30929 License #
hot washer Plumbing Contractor Information
Description of Work Bough in Shower, plumbing Kitchen 5 # Baths
Plumbing Contractor's Company Name 70 734 7427 Telephone
Address Email Address Email Address Email Address Email Address
17505 License #
Insulation Contractor Information
Tricity Insulation - Anta Rostal- 910, 484, 8855 Insulation Contractor's Company Name & Address 3154 Camden Rd, Stel, Fay, NC 28304

*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 surrent fee schedule. 9-2-21 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: X 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 χ 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

Owner Date:

carrying out the work.

Sign w/Title: