

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

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

Application for Residential Building and Trades Permit

Owner's Name: Kerin Graves	Date 2-21-22
Site Address: 638 Pendergraph Rd, Burn Jeve	NC Phone 910-237-6025
Subdivision:	Lot
Description of Proposed Work: Addition / close curpor	
General Contractor Inform	nation
General Contractor Inform	910-669-7066
Building Contractor's Company Name	Telephone
Winberly Builders, LLC Building Contractor's Company Name 2568 OH Builds (Nick Rd, Agrice NC 2750) Address	Email Address
83329 HEATED SQ FT 598 GARA	GE SQ FT
License #	mation
Description of Work Electrical Sor Termodu Service	Size: DO Amps T-Pole: Yes No
Levin Graves	(910) 237-6025
Electrical Contractor's Company Name	Tetephone
638 Pendargraft Rd Burnleve NC	
Address	Email Address
Homeowner	
License # Mechanical/HVAC Contractor I	Information
Description of Work HVac Ar remodel	
CPUM Graves	Same as above
Mechanical Contractor's Company Name	Telephone
Same as above	1
Address	Email Address
Home owner	
License #	
Plumbing Contractor Infor	mation ?
Description of Work Plumbing for Remodel	# Baths
Keuin Graves	Same as abor
Plumbing Contractor's Company Name	Telephone
Same as above	Email Address
Address	Littali Address
License #	
Insulation Contractor Info	rmation
Cumberland Insulation Co	(910) 484-7118
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 bysigning 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.

2/22/2622 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:	