



Application # _____

Harnett County Central Permitting
 420 McKernan 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

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

Owner's Name: Marcia & Kenneth Maires
 Site Address: 45 Wood Stephens Rd Hixson, NC
 Subdivision: RV Resort
 Description of Proposed Work: RV Resort
 Total Job Cost: 15,000
 Date: 3/17/23
 Phone: 336-906-0919
 Lot: _____

Building Contractor's Company Name: Self-Marcia Maires
 Address: _____
 HEATED SQ FT _____ GARAGE SQ FT _____
 License # _____
 Description of Work: _____
 Electrical Contractor Information
 Service Size: _____ Amps T-Pole: Yes No

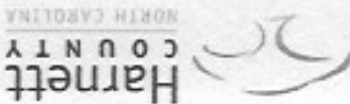
Electrical Contractor's Company Name: _____
 Address: _____
 License # _____
 Description of Work: _____
 Mechanical/HVAC Contractor Information
 Telephone: _____
 Email Address: _____

Mechanical Contractor's Company Name: _____
 Address: _____
 License # _____
 Description of Work: _____
 Plumbing Contractor's Company Name: _____
 Telephone: _____
 Email Address: _____
 # Baths: _____

Insulation Contractor's Company Name: _____
 Address: _____
 License # _____
 Description of Work: _____
 Insulation Contractor Information
 Telephone: _____
 Email Address: _____

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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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.

Signature of Owner/Contractor/Officers(s) of Corporation
Maurice Thomas

Date
3/17/23

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 subcontractor(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractor(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: Maurice Thomas
Date: 3/17/23