

* 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: Betty Laws	Date <u>03/28/202</u>
Site Address: 2247 Old Buies Creek Rd Angier Nc 27501	Phone <u>919-812-5594</u>
Subdivision:	Lot 0672-62-6971-000
Description of Proposed Work:foundation repair: 2 helical piers to stabilze foundation	ationTotal Job Cost 4605
General Contractor Informatio	<u>n</u>
Southeast Foundation Repair LLC	910 299-0198
Building Contractor's Company Name	Telephone
709 1/2 Southwest Blvd Clinton NC 28328	vsoto@sefoundationrepair.com
Address	Email Address
n/a - under 30 k HEATED SQ FT 999 GARAGE S	QFT
License #	
Electrical Contractor Information	
Description of Work Service Size:	Amps T-Pole:YesNo
Floatrical Contractorio Communi, Nama	Talankana
Electrical Contractor's Company Name	Telephone
Address	Email Address
Address	Littali Address
License #	
Mechanical/HVAC Contractor Inform	mation_
Description of Work n/a	
Mechanical Contractor's Company Name	Telephone
Anna Parameter of San	
Address	Email Address
License #	
Plumbing Contractor Information	<u>on</u>
Description of Work _n/a	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	
Insulation Contractor Information	<u>on</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.

03/28/2022

Date

George Herring
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 Ownerx 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 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: George Herring gm Date: 03/28/2022