

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

Owner's Name: Keury 4 Tear To HUSON Date 4 7 2022 Site Address: 100 W. LLE KEUD LN. Davn N.C. Phone 90-444-8440 Subdivision: Lot 3 Description of Proposed Work. 1005 TRULT 30X50 Total Job Cost 35000 90 General Contractor Information TAMES JACKSON HOME BUT JARM RD. COATS N.C. Telephone 43	Owner's Name KENN	y & JEAN JOHUSON	Date 4 (7/2012
Description of Proposed Work. Constructor Social Job Cost S	Site Address: 100 49.	LLE MELEOD LN. Dann N.C	Phone 910-444-8440
Building Contractor's Company Name #36 @AK VALLEY FARM R.D. COARS N.C. Address Building Contractor S Company Name #36 @AK VALLEY FARM R.D. COARS N.C. Building Contractor Information Description of Work COARS N.C. Building Address	Subdivision:		Lot 3
Building Contractor's Company Name #36 @AK VALLEY FARM R.D. COARS N.C. Address Building Contractor S Company Name #36 @AK VALLEY FARM R.D. COARS N.C. Building Contractor Information Description of Work COARS N.C. Building Address	Description of Proposed Wo	K. CONSTRUCT BOX50	Total Job Cost 35000,00
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Address Address Address Address Address Address Address Address Address Address Amps	JAMES JACKSON	HOME BUILDER	919-820-5366
Address Address Address Address Address Address Address Address Address Address Amps	Building Contractor's Compa	any Name	Telephone
License # Electrical Contractor Information Service Size: Amps T-Pole: Yes No	436 OAK VALLE	EN FARM RD. COATSNE	ipuilder 436218 Mail. com
Description of Work	Address		Email Address
Description of Work	13649	HEATED SQ FT GARAGE S	QFT
Description of Work Service Size:Amps T-Pole:YesNo Electrical Contractor's Company Name	License #	Electrical Contractor Information	on
Electrical Contractor's Company Name Address Email Address License # Mechanical/HVAC Contractor Information Description of Work Mechanical Contractor's Company Name Telephone Address Email Address Email Address Email Address License # Plumbing Contractor Information Description of Work # Baths #	Description of Work	Service Size:	Amps T-Pole:YesNo
Address License # Mechanical/HVAC Contractor Information Description of Work Mechanical Contractor's Company Name Telephone Address Email Address Email Address Email Address Email Address Email Address License # Plumbing Contractor Information Description of Work # Baths			
License # Mechanical/HVAC Contractor Information Description of Work Mechanical Contractor's Company Name Telephone Address Email Address License # Plumbing Contractor Information Description of Work# Baths	Electrical Contractor's Company Name		Telephone
License # Mechanical/HVAC Contractor Information Description of Work Mechanical Contractor's Company Name Telephone Address Email Address License # Plumbing Contractor Information Description of Work# Baths			
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Mechanical Contractor's Company Name Address Email Address License # Plumbing Contractor Information Description of Work # Baths	License #	Mechanical/HVAC Contractor Inform	mation
Mechanical Contractor's Company Name Address Email Address License # Plumbing Contractor Information Description of Work # Baths	Description of Work		
Address License # Plumbing Contractor Information Description of Work # Baths	Description of Visit		
License # Plumbing Contractor Information Description of Work# Baths	Mechanical Contractor's Company Name		Telephone
License # Plumbing Contractor Information Description of Work# Baths		_	
Description of Work# Baths	Address		Email Address
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Description of Work# Baths	License #	Plumbing Contractor Informati	on
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	Plumbing Contractor's Company Name		Telephone
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Address Email Address	Address		Email Address
License # Insulation Contractor Information	License #	Inculation Contractor Informati	ion
insulation Contractor information		insulation Contractor informati	ion
Insulation Contractor's Company Name & Address Telephone	Insulation Contractor's Com	pany 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.

gnature 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:
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: Laws Rof author owner Date: 4/2/2022