

Application #

\* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## **Application for Residential Building and Trades Permit**

tor. Address, company phone must match tion on license.	Application for Residential Building and	Trades Permit
	iam Robert Barefoot	Date: 6-7-22
Site Address: 3036	NC Hury . 27 East , Coats , NC 275	Phone: (910) 890 - 3254
Subdivision: N/A		Lot: N/A
Description of Propose	ed Work: Construction of In-ground poo	1. Total Job Cost: # 80,000
	General Contractor Informat	tion .
Barefoo+ Building Contractor's C	Company Name	(910) 890 - 3256 Telephone
P.o. Box 14 Address	11, Coats, NC 27521	wrbarefoot @ yahoo.com Email Address
81627	LEATED SOPT NA GARAGE	SORT NA
License #	Electrical Contractor Informa	ation
Description of Work in	stallation of electrical system Service Siz	
	Electric , Inc.	(919) 499-5389
Electrical Contractor's	100 march 100 ma	Telephone
Address	Rd., Sanford, NC	Email Address
U. 12007		Email Address
License #	_	
	Mechanical/HVAC Contractor Info	ormation
Description of Work	× 1	
Mechanical Contractor	Co Company Name	Talahan
Mechanical Contractor	s Company Name	Telephone
Address		Email Address
1:#		
License #	Plumbing Contractor Informa	ation
Description of Work	astallation of plumbing system for poo	
Fred Anthur	· Chris Lecuyer III	(919)676-1925
Plumbing Contractor's	Company Name	Telephone
115 Keyman	Drive, Coats, NC 27521	
Address '		Email Address
L. 30173 License #		\$ #
LIGHING #	Insulation Contractor Informa	ation
4-24-2-4-3-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4		· · · · · · · · · · · · · · · · · · ·
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.

NUR BE	6-7-2022
Signature of Owner/Contractor/Officer(s) of Corporation	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: 2022 Date: 6-7-2022			