

Application#_____

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

Hamett 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: Peter A. Gallagher	Date 3/31/2022
Site Address: 616 Kerth Hills Road Lillington	12 27546 Phone 703 606 9916
Subdivision: Keith Hills	Lot
Description of Proposed Work: Outdoor Structure, Kitchen Gas five	1 Total Job Cost \$ 15,000
General Contractor Information	1
Tim Goodwin	910658 0248
Building Contractor's Company Name	Telephone
283 Chesley Lane / Mington NC 27546	time for- no. com
Address	Email Address
82236 HEATED SQ FT NA GARAGE SO	DET NA
license #	•
Electrical Contractor Informatio	<u>n</u>
Description of Work fytend line, plugs, light Service Size:	Amps T-Pole:YesNo
Fred Genet	910 890 3520
Electrical Contractor's Company Name	Telephone
634 Kerth Hills Road Lillington NC 27546	forgenet @ hotmail.com
Address	Email Address
29225	
License #	nation 6 Es Frepit / Cill Tochnice
Mechanical/HVAC Contractor Inform	nation & Color of the Color of
Description of Work Technical INSFAILation Gas Gr	11/1 Frepit
Farmer LP Gas Dil Co Inc. Andrew Hoe Mechanical Contractor's Company Name	F 910 8902310
Mechanical Contractor's Company Name	Telephone 910 - 843 - 3598
805 US401 Lillington NC 27546	
Address	Email Address
22504	
License #	
Plumbing Contractor Informatio	
Description of Work Kun water line Konnect Sint draw	# Baths_ NP
Sub Contract per - Purchase beforework bagins	910 890 2299
Plumbing Contractor's Company Name	Telephone
JR Wagner Wagner Plumbing	
	Email Address
31576 SSS Tirzal Drive	1/-
License #	
Insulation Contractor Information	
NA T	
Inculation 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 Hamett 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.

Pete a Guest

Signature of Owner/Contractor/Officer(s) of Corporation

3/3//2022 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.	
$\overline{\text{them.}}$ 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: Date: 3/3//2022	