

* 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

7 pp. 10 at 10 t 10 at 10 at 11 at 1	
Owner's Name Jeffrey Kent Johnson Sue Ster	warf Johnson Date 07-28-22
Site Address: 2153 Clayholi Kd. Coats MC	Phone (910)890-42
Cubdivision:	Lot WIA
Description of Proposed Work: Adding Fanily Room	Total Job Cost
General Contractor Information	
Jeffrey Kent Johnson	919-291-0376
Building Contractor's Company Name	Telephone
2153 Clayhole Road Coats N.C.	
Address	Email Address
N/A HEATED SQ FT 980 GARAGE SC	ET
License #	
Electrical Contractor Information	1
Description of Work New Addition Service Size:	and the second s
Tommy Patrick Electrical Contractor's Company Name	9/0-237-1594 Tolophore
1309 North Marn Lillington	Telephone
Address	Email Address
49/0 U	Littali Address
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work Mini Spl.+ Heat pump's	
J+M Heating And Air Fonditioning	910-897-5501
Mechanical Contractor's Company Name	Telephone
724 Turlington ROADDUNN N.C.	
Address	Email Address
17/64	Lindii Address
	Enal Address
License #	
Plumbing Contractor Information	1
Description of Work /2 Bath	<u>1</u> _# Baths
Description of Work 1/2 Bath Black River Plumbing	1 # Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor Information Black River Plumbing Plumbing Contractor's Company Name	<u>1</u> _# Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor's Company Name 6250 Barefoot Road Wade N.C.	1 # Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor Information Black River Plumbing Plumbing Contractor's Company Name 6250 Barefoot Road Wade NC- Address	1 # Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor's Company Name 6250 Barefoot Road Wade N.C. Address 32506	1 # Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor's Company Name 6250 Barefast Road Wade NC- Address 32506 License # Insulation Contractor Information	1 # Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor's Company Name 6250 Barefast Road Wade NC- Address 32506 License # Insulation Contractor Information	1 # Baths
Description of Work /2 Bath Black River Plumbing Plumbing Contractor's Company Name 6250 Barefoot Road Wade NC- Address 32506 License #	1 # Baths

*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.

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

Sign w/Title:

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. X Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover 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. Leut Johnson Date: 7-28-2022