

		Application #
	Harnett County Central Permittin 420 McKinney Pkwy Lillington, NC 2754	ng 16
st be owner/occupier or sed contractor. Address,	PO Box 65 Lillington, NC 27546	
pany name & phone must h information on license.	910-893-7525 ext. 1 Fax 910-893-2793 www.ham	ett.org/permits
	Application for Residential Building and	Frades Permit
Owner's Name: <b>Patr</b>		Date225-2022
	Tall Oak Drive Spring Lake NC 283	_
Subdivision: Tall Oa		Lot _ <b>5</b>
Description of Propose	d Work: Free standing 10x10 deck	Total Job Cost _ <b>\$1,500.00</b>
	General Contractor Information	on
KW Quality Trades Inc.		919-901-4085
Building Contractor's Company Name		Telephone
	rcle Selma NC 27576	kwqualitytrades@gmail.com
Address	UNHEATED 100 SQ FT	Email Address
nsed-less than \$30k License #	HEATED SQ FT GARAGE S	SQ FT
	Electrical Contractor Informati	
Description of Work	N/A Service Size	:Amps  T-Pole:YesNo
Electrical Contractor's (		Talanhana
Electrical Contractor's	company Name	Telephone
Address		Email Address
	-	
License #		
	Mechanical/HVAC Contractor Infor	mation
License # Description of Work <u>N</u>		mation
Description of Work <u>N</u>	/A	
	/A	mation  Telephone
Description of Work <u>N</u> Mechanical Contractor'	/A	Telephone
Description of Work <u>N</u>	/A	
Description of Work <u>N</u> Mechanical Contractor'	/A	Telephone
Description of Work N Mechanical Contractor' Address License #	A s Company Name  Plumbing Contractor Information	Telephone Email Address
Description of Work <u>N</u> Mechanical Contractor' Address	A s Company Name  Plumbing Contractor Information	Telephone Email Address
Description of Work N Mechanical Contractor' Address License # Description of Work	A s Company Name  Plumbing Contractor Informati N/A	Telephone Email Address on # Baths
Description of Work N Mechanical Contractor' Address License #	A s Company Name  Plumbing Contractor Informati N/A	Telephone Email Address on
Description of Work N Mechanical Contractor' Address License # Description of Work Plumbing Contractor's	A s Company Name  Plumbing Contractor Informati N/A	Telephone Email Address on # Baths Telephone
Description of Work N Mechanical Contractor' Address License # Description of Work	A s Company Name  Plumbing Contractor Informati N/A	Telephone Email Address on # Baths
Description of Work N Mechanical Contractor' Address License # Description of Work Plumbing Contractor's	A s Company Name Plumbing Contractor Informati N/A Company Name	Telephone Email Address on # Baths Telephone Email Address
Description of Work N Mechanical Contractor' Address License # Description of Work Plumbing Contractor's of Address License #	A s Company Name  Plumbing Contractor Informati N/A	Telephone Email Address on # Baths Telephone Email Address
Description of Work N Mechanical Contractor' Address License # Description of Work Plumbing Contractor's of Address License # License #	A s Company Name Plumbing Contractor Informati N/A Company Name	Telephone Email Address on # Baths Telephone Email Address

\*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.

KW Quality Trades Inc. Signature of Owner/Contractor/Officer(s) of Corporation

9-25-2022

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
X 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.		
$\mathbf{X}$ 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: KW Quality Trades Inc. Kimberly Woodall PRESIDENT		