

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: Anthony Edward Williams	Date 2-28-23
Site Address: 32 Victoria Lane Coats NC 275	21 Phone 919-422-9916
Subdivision:	Lot
Description of Proposed Work: 30 X 70 Metal Bldg	Total Job Cost 75
General Contractor Information	n
No GC - Anthony Williams-Home Owner Building Contractor's Company Name	949-422-9916 Telephone
32 Victoria Lane Coats, NC, 27521 Address	Kwilliams 61904@outlook.com
License #	QFT 2100
Description of Work Dwner - Ill he Wiring Service Size:	A control of the cont
the electrical myself Electrical Contractor's Company Name	919 422 9916 Telephone
32 Victoria Lane, Goats NR 27521 Address Seperate Meter	Kwilliams61904@outlook.com Email Address
License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work	
*	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License #	
Plumbing Contractor Informatio	<u>n</u>
Description of Work	_# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	
Insulation Contractor Informatio	<u>n</u>
Insulation Contractor's Company Name & Address	Telephone
	. Siophorio
*NOTE: General Contractor / owner must fill out and sign the s	econd page of this application.

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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

Affidavit for Worker's Compensation N 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) of set forth in the permit:	or corporation(s) performing the work	
Has three (3) or more employees and has obtained workers' com-	pensation insurance to cover them.	
Has one (1) or more subcontractors(s) and has obtained workers them.	compensation insurance to cover	
Has one (1) or more subcontractors(s) who has their own policy of covering themselves.	of workers' compensation insurance	
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: anthony Edward Williams	Date: 2-28-23	