

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: Veff Mabry	Date //2 23
Site Address: 459 Mabry Rd	Phone 252 · 343 - 5116
Subdivision: NOT IN SUBDIVISION	Lot
Subdivision: NOT IN SUBDIVISION Description of Proposed Work: Foundation Repair	Total Job Cost # 17, 250
Attantic Fundation; Crawispace Repuir Building Contractor's Company Name [015 Jordan Narron Rd Selma NU 27576 Address	919-607-9655
Building Contractor's Company Name	Telephone
Address	Email Address
60032 HEATED SQ FT GARAGE S	QFT
License # Electrical Contractor Information	
Description of Work Service Size:	Amps T-Pole:YesNo
Electrical Contractor's Company Name	Telephone
Address	Email Address
License #	
Mechanical/HVAC Contractor Inform	mation
Description of Work	
Mechanical Contractor's Company Name	Telephone
medianical solutions solution in the manufacture of	rolophone
Address	Email Address
License #	
Plumbing Contractor Information	on
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Plumbling Contractor's Company Name	relephone
Address	Email Address
License #	
Insulation Contractor Informati	on
Insulation Contractor's Company Name & Address	Telephone

*NOTE: General Contractor / owner must fill out and sign the second 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.

Date

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

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
Sign w/Title: Date: 4/2/23