



Application # _____

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

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

Application for Residential Building and Trades Permit

Owner's Name: Cheryl Schumacher Date 8/18/23
Site Address: 479 D.L. Phillips Ln, Broadway, NC 27505 Phone 919-897-9344
Subdivision: _____ Lot _____
Description of Proposed Work: *description attached w/plans Total Job Cost \$ 29,440

General Contractor Information

N/A Mr. Smokestack Chimney Service 919-747-1859
Building Contractor's Company Name Telephone
203 N. main St. Broadway
Address Email Address
N/A
License # HEATED SQ FT GARAGE SQ FT

Electrical Contractor Information

Description of Work Install elec. outlet Service Size: _____ Amps T-Pole: Yes No
Harte Electric LLC (919)-639-6851
Electrical Contractor's Company Name Telephone
7836 Hwy 55 S, Willow Spring, NC 27592 harteelectric@gmail.com
Address Email Address
23339
License #

Mechanical/HVAC Contractor Information

Description of Work Gas line installation of fireplace & chimney (description attached)
Mr. Smokestack Chimney Service (919)-747-1859
Mechanical Contractor's Company Name Telephone
203 N. Main St Broadway, NC 27505 Friends@mrsmokestack.com
Address Email Address
34313
License #

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name Telephone
Address Email Address
License #

Insulation Contractor Information

Insulation 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 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.

[Handwritten Signature]

8/18/23

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

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.

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: *[Handwritten Signature]* - *GENERAL OWNER / MANAGER* Date: *8/18/23*