

Application # \_\_\_\_\_nett County Central Permitting

\* 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:Tommy Thystrup			Date 8-29-202
Site Address: 3278 Rosserpittman rd Bro		Phone	919-356-4948
		Lot	NA
Description of Proposed Work: Renov / piers	s not adding to existing	Total Job Cost	
	I Contractor Information		
Lawrence Curtis		919-708-231	6
Building Contractor's Company Name 456 Heron Rogers LN Broadway NC,  Telephone Witsremodeling		ng97@gmail.com	
Address		Email Address	
74761 HEATED SQ	FT 1372 GARAGE SQ	FT 0	
License #			
	al Contractor Information		alay VVaa Na
Description of Work	Service Size: Z		
JM Pope electrical Electrical Contractor's Company Name		910-890-3655 Telephone	<u> </u>
409 Chatham Str, Sanford No		relephone	
Address		Email Address	
21326		Lindii Address	
License #			
Mechanical/	HVAC Contractor Informa	ation	
Description of Work			
Kenneth Ray Fewell		919-35	6-2091
Mechanical Contractor's Company Name		Telephone	0 0011
Address		Email Address	
20311			
License #			
	g Contractor Information	M.	
Description of Work		# Baths	
Plumbing Contractor's Company Name		Telephone	
	ρ		
Address		Email Address	
License #			
	n Contractor Information		
Homeowner			
Insulation Contractor's Company Name & Add	ress	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 <a href="by-signing-below-I have obtained all subcontractors">by-signing-below-I have obtained all subcontractors</a> permission to obtain these permits and if <a href="any changes">any changes</a> 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

9-2-2023 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: Date:			