

Application #

* Each section below to be filled out by whomever performing work.

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

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 <u>www.harnett.org/permits</u>

Email: Centralpermitting@harnett.org

Application for Residential Building and Trades Permit

Owner's Name:	Date 16 Mar 24
Site Address: 419 Dunbar Drive	Phone 910-808-1027
Subdivision: Woodshire	
Description of Proposed Work: Four Season Room	
Jeffery Hargrove Owner Jeffery Hargrove Building Contractor's Company Name	910-808-1027 Telephone
419 Dunbar Drive	admin@hb4net.com
Address	Email Address
HEATED SQ FT 0 GARAGE SO	FT 504 (Existing, No Upgrade)
License # Electrical Contractor Information	n
Description of Work Service Size:	
Electrical Contractor's Company Name	Telephone
Address	Email Address
License #	
Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work Extend current HVAC to cover addition per plans	
General Solutions LLC	910-808-1027
Mechanical Contractor's Company Name 150 Edna Lane, Lillington, NC 27546 Jeffery Hargrove	Telephone
Address	admin@hb4net.com Email Address
37094	Zman / Nacroso
License #	
Plumbing Contractor Information	<u>n</u>
Description of Work	_# Baths
Plumbing Contractor's Company Name	Telephone
Address General Solutions LLC	Email Address
License # Insulation Contractor Informatio	<u>n</u>
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.

Jeffery Hargrove 30 Apr 24	
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 X 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.	
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: Jeffery Hargrove Date: 30 Apr 24	