



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

Application # _____

Application for Residential Building and Trades Permit

* 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.

Owner's Name: Bryant and Jody Clark Date: 5-8-24

Site Address: 246 Iris Bryant Rd. Erwin, NC 28329 Phone: 910-263-5241

Subdivision: _____ Lot: _____

Description of Proposed Work: Addition to existing home: master bedroom and bathroom Total Job Cost: \$55,000 - estimate

General Contractor Information

Bryant Clark - owner Telephone: 919-524-9841
 Building Contractor's Company Name

Address _____ Email Address: jclckamyclark@gmail.com
 HEATED SQ FT _____ GARAGE SQ FT _____ \$25,000

License # _____
 Description of Work: light fixtures, receptacles, ceiling fan Electrical Contractor Information
run power to addition Service Size: _____ Amps T-Pole: Yes No

Bryant Clark Telephone: same
 Electrical Contractor's Company Name

Address _____ Email Address: same \$7,500

Mechanical/HVAC Contractor Information

Description of Work: Install mini split
Bryant Clark Telephone: same
 Mechanical Contractor's Company Name

Address _____ Email Address: same \$2,000

Plumbing Contractor Information

Description of Work: Install toilet and sink, shower # Baths: 1
Bryant Clark Telephone: same
 Plumbing Contractor's Company Name

Address _____ Email Address: same \$5,000

Insulation Contractor Information

Bryant Clark Telephone: same
 Insulation Contractor's Company Name & Address

\$6,000

*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.

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

5-8-24
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: Bryant Clark Date: 5-8-24