

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

Pichard Coorgo Stump	
Owner's Name: Richard George Stump	Date _07/11/2024
	Phone (910) 591-8405
Subdivision: Erwin Mills	201
Description of Proposed Work: In accordance with the engineer report, we will repair the	
crawlspace structure. General Contractor Information	
Groundworks North Carolina LLC. T/A Tar Heel Basement Systems	<u>-</u> (910) 550-1061
Building Contractor's Company Name	Telephone
1741 Corporate Landing Pkwy., Virginia Beach, VA 23454	raleighaccounting@tarheelbasementsystems.com
Address	Email Address
79336 HEATED SQ FT <sup>2,003</sup> GARAGE SO	2 FT
License #	
Description of Work Service Size:	<u>n</u> Amps_T-Pole:YesNo
Electrical Contractor's Company Name	Telephone
Address	Email Address
License # <u>Mechanical/HVAC Contractor Inform</u> Description of Work	
Mechanical Contractor's Company Name	Telephone
Mechanical Contractor's Company Name	Telephone Email Address
Mechanical Contractor's Company Name Address License #	Telephone Email Address
Mechanical Contractor's Company Name Address License # Plumbing Contractor Informatio	Telephone Email Address <u>n</u>
Mechanical Contractor's Company Name Address License # Plumbing Contractor Informatio Description of Work	Telephone Email Address <u>n</u> # Baths
Mechanical Contractor's Company Name Address License # Plumbing Contractor Informatio Description of Work Plumbing Contractor's Company Name	Telephone Email Address  # Baths Telephone Email Address



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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

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

07/11/2024

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14	
The undersigned applicant being the:	
X General Contractor Owner _ X 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:	
X 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: 07/11/2024	