

Application # _____

* 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: Jamie Holloway	Date 4/21/25
Site Address: 162 Hobby Rd Holly Springs, 27540	Phone (919996-1096
Subdivision:	Lot 5
Description of Proposed Work: Metal garage	Total Job Cost 75 K
General Contractor Information	
Custom Built Structures	336-415-4520 ex+ 121
Building Contractor's Company Name	Telephone
510 Riverside Dr. #100, Mt. Airy, NC 27030	thomas @custombuitstructures.
Address	Email Address
87790 HEATED SQ FT GARAGE SC	1800
License #	
Electrical Contractor Information	
Decemperation of them.	Amps T-Pole:YesNo
141140 (101/001	
Electrical Contractor's Company Name	Telephone
Owner fram Taller	yoshimurarrayahoo.com
Address	Email Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work Mini Split	
Owner from Heller	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
License # Plumbing Contractor Information	
	1/2
Description of Work Possible Half Bath	# Baths
Own flam fell	T.L. L.
Plumbing Contractor's Company Name	Telephone
	For all Address
Address	Email Address
License # Insulation Contractor Informatio	n
Jamie Holloway Owner	11
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.

Signature of Ourper/Contractor/Officer/s/off Cornoration

Date

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:	