- Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match

## י ייף ווים וויטוו ה Harnett County Central Permitting PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit Owner's Name: Date: Site Address: 27 Phone: 9 Directions to job site from Lillington: Subdivision: Lot: Description of Proposed Work: # of Bedrooms: Heated SF 496 Unheated SF: 460 Finished Bonus Room? Crawl Space: General Contractor Information Building Contractor's Company Name Address Signature of Owner/Contractor/Officer(s) of Corporation License # Electrical Contractor Information Description of Work Service Size: 200 Amps T-Pole: Yes No. Contractor's Company Name Address Email Address Signature of Owner/Contractor/Officer(s) of Corporation License # Mechanical/HVAC Contractor Information Description of Work Email Address Signature of Own Contractor/Officer(s) of Corporation License # Plumbing Contractor Information Description of Work Plumbing Contractor's Company Name Telephone Address **Email Address** Signature of Owner/Contractor/Officer(s) of Corporation License # Insulation Contractor Information Insulation Contractor's Company Name & Address

\*NOTE: General Contractor must fill out and sign the second page of this application.

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| Homeowners Applying to Build Their Own Home Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)   |  |
|--|--|
| 1. Do you own the land on which this building will be const  | ructed? Yes No   |
| 2. Have you hired or intend to hire an individual to supering manage construction of the project?  | end and Yes No   |
| 3. Do you intend to directly control & supervise construction  | n activities? Yes No   |
| 4. Do you intend to schedule, contract, or directly pay for a construction work to be done?  | Il phases of Yes No  |
| 5. Do you intend to personally occupy the building for at least months following completion of construction and do you une you do not do so, it creates the presumption under law that secured the permit?   | derstand that if   |
| 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 if <a href="mailto:any">any</a> 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 Owner/Contractor/Officer(s) of Corporation  Date |  |
| Affidavit for Worker's Compensation The undersigned applicant being the:   | on N.C.G.S. 87-14  |
| General Contractor Owner Officer/A   |  |
|  | gent of the Contractor or Owner  |
| Do hereby confirm under penalties of perjury that the person(s), fir set forth in the permit:  |  |
| Do hereby confirm under penalties of perjury that the person(s), fir   | m(s) or corporation(s) performing the work   |
| Do hereby confirm under penalties of perjury that the person(s), firset forth in the permit:  Has three (3) or more employees and has obtained workers  Has one (1) or more subcontractors(s) and has obtained wo them.  Has one (1) or more subcontractors(s) who has their own portions.   | m(s) or corporation(s) performing the work compensation insurance to cover them.   |
| Do hereby confirm under penalties of perjury that the person(s), first set forth in the permit:  Has three (3) or more employees and has obtained workers.  Has one (1) or more subcontractors(s) and has obtained workers.  Has one (1) or more subcontractors(s) who has their own pocovering themselves.  | m(s) or corporation(s) performing the work compensation insurance to cover them. rkers' compensation insurance to cover  |
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