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

Application # 08 5 - 21260

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

COMMERCIAL

Application for Power

Application for Building and Trades Permit			
Owner's Name: McCornell Waste Systems : Recycling Date: 1129109			
Site Address: 155 Progress Dr. Fuguray Varine Phone: 919-669-1212			
Site Address: 155 Progress Dr. Fuquey Varine Phone: 919-669-1212 Directions to job site from Lillington: 401 N, 1614 of Hwy 42, Rt. on Frogress Dr. ve			
Subdivision: Dincon Industrial Park Lot: 4			
Description of Proposed Work:			
Heated SF 360 Unheated SF 1200 General Contractor Information Building Cost \$ 15,291 (Stul Package)			
Mc Connell Waste Sistems: People 3 Building Contractor's Company Name Tree. 3 Telephone			
113 Flint Point Lane, Holly Springs NC Currer of property Address License #			
Must sign & fill out second page			
Signature of Owner/Contractor/Officer(s) of Corporation Electrical Permit Information Elec Cost \$ 1500			
Description of Work with new building Service Size: 200 Amps #TPoles 1			
Electrical Contractor's Company Name 919-534-7638 Telephone			
License #			
B)-mc OI			
Signature of Officer(s) of Corporation Mechanical Permit Information Mech Cost \$ 4 000			
Description of Work in stall 1 5000 HYPCLINT # Units			
McConnell Waste Systems: Recycling Mechanical Contractor's Company Name 919-669-1212 Telephone			
3/13 Flint Point Ln. Holly Springs Nr. 27540 Quner			
Address License #			
Signature of Officer(s) of Corporation Plumbing Permit Information Plumb Cost \$ 4,000			
Description of Work One bathson w/sink; canada, and how # Baths			
McCornell Waste Systems: Recycly Inc 919-669-1212			
Plumbing Contractor's Company Name Telephone			
Address License #			
Address # 27540 License #			
Signature of Officer(s) of Corporation Insulation Permit Information			
McConnell Waste Systems: Recycling Irc 919-669-1212			
Insulation Contractor's Company Name & Address Telephone			

Sprinkler System Information			
Not Pegured	0		
Sprinkler Contractor's Company Name	Contact & Telephone		
Address	License #		
Signature of Officer(s) of Corporation			
Fire Alarm System Information			
Fire Alarm Contractor's Company Name	- · · · · · · · · · · · · · · · · · · ·		
Fire Alarm Contractor's Company Name	Contact & Telephone		
Address	License #		
Signature of Officer(s) of Corporation			
Driveway Access - NC Department of Transports	ation Driveway Access/Permit? Yes	No	
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 <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.			
<u>.</u>	1/29/09		
Signature of Owner/Contractor/Officer(s) of Corporation 1/29/69 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	r	
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.			
Company or Name: McConnell Waste S	ystems & Rocycly		
Sign w/Title:	Date:Date:		