

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

Application # _____

Harnett County Central Permitting

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

COMMERCIAL

Application for Building and Trades F	<u>Permit</u>
Owner's Name: Harnett County Schools / Overhills H	ich Date: 9-27-21
Site Address: 2495 Ray Rd. Spring Lake, NC 2839	10 Phone: 916-703-527 S
Description of Proposed Work: Build New Hut	
General Contractor Information: Building Cost \$ 14,500	
Harnett County Schools Building Contractor's Company Name	915-893-4808 Telephone
Address Address Address Address	Email Address
Signature of @wngr/Contractor/Officer(s) of Corporation	License # L29742
Electrical Contractor Information: Electrical Cost \$ Description of Work Wew Hat Service Size: 100	Amps #T-Poles 910 890 3418
Electrical Contractor's Company Name	Telephone Wwester & harnett, K/2, NC. 45
Address	Email Address L 29742
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Contractor Information:	License #
	# Units
	910 890 3418
Mechanical Contractor's Company Name	Telephone Wheret & M. w
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost \$	License #
Description of Work NONE	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information Insulation Contractor Information	910-772-9000
Insulation Contractor's Company Name & Address	Telephone

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



Sprinkler Contractor Information	
NONE	
Sprinkler Contractor's Company Name	Telephone
Address	Email Address
Signature of Officer(s) of Corporation License # Fire Alarm Contractor Information	
Fire Alarm Contractor's Company Name	Telephone
Address	Email Address
Signature of Officer(s) of Corporation	License #
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit?YesNo	
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 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 charged at full price per current fee schedule.	
K 1 ()	9-17-21
Signature of Owner/Contractor/Officer(s) of Corporation	9-27-21 Date
Signature of english contraster/officer(s) or corporation	
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.	
Mile working on the project for which this negative accorded it is underest	
While working on the project for which this permit is sought it is underst Department issuing the permit may require certificates of coverage of w to issuance of the permit and at any time during the permitted work from carrying out the work.	orker's compensation insurance prior