



*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 Permit

Owner's Name: T-Mobile Date: 9/16/2022

Site Address: 6908 Cokesbury Rd, Holly Springs, NC 27540 Phone: n/a

Description of Proposed Work: adding generator @ existing cell site - transfer of permit # ECOM2204-0005

General Contractor Information: Building Cost \$ 6000 (electrical)

Jacobs Telecommunications, Inc.

704-953-8146

Building Contractor's Company Name

Telephone

1355 Continental Blvd. Charlotte NC 28273

Josh.Johnston@jacobs.com

Address

Email Address

Josh Johnston
Digitally signed by Josh Johnston
DN: cn=Josh Johnston, o=US, ou=Jacobs, ou=Jacobs Telecommunications,
email=josh.johnston@jacobs.com
Reason: I agree to the terms defined by the placement of my signature on this document
Date: 2022.09.16 12:13:14 -0400

74930

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

License #

Electrical Contractor Information: Electrical Cost \$ 6000

Description of Work 48 kw diesel generator install Service Size: n/a Amps #T-Poles _____

Skytel Contractors, Inc.

706-216-0963

Electrical Contractor's Company Name

Telephone

331 Grant Road East, Dawsonville, GA 30534

ashley@skytelcontractors.com

Address

Email Address

Ashley Wilkins

U.30352

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

License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

Mechanical Contractor's Company Name

Telephone

Address

Email Address

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

License #

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____

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

Telephone

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

Sprinkler Contractor Information

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 #

Driveway Access - NC Department of Transportation 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 **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.

Josh Johnston

Digitally signed by Josh Johnston
DN: cn=Josh Johnston, c=US, ou=Jacobs, ou=Jacobs Telecommunications,
email=josh.johnston@jacobs.com
Reason: I agree to the terms defined by the placement of my signature on this document
Date: 2022.09.16 12:15:45 -0400

9/16/22

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

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: **Josh Johnston**

Digitally signed by Josh Johnston
DN: cn=Josh Johnston, c=US, ou=Jacobs, ou=Jacobs Telecommunications, email=josh.johnston@jacobs.com
Reason: I agree to the terms defined by the placement of my signature on this document
Date: 2022.09.16 12:15:24 -0400

Date: 9/16/22