

Application # _____

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Harnett County Central Permitting
PO Box 65 Lillington, NC 27548
910-893-7525 Fex 910-893-2793 www.hamett.org/permits
COMMERCIAL

Application for Rull-Management

Application for Building and Trades Permit		
Owner's Name: Ray & Rhunda Horrington	Date:	
Site Address: Patkson Road	Phone:	
Description of Proposed Work: Build Singh Story &	ell' Slorage	
General Contractor Information: Building Cost \$ 264,000		
Consolidad Propring Suices	919 422 8404	
Building Contractor's Company Name	Mark & pena-bot com	
	Mark & pina-boti com	
Address	Email Address (6658)	
Signature of Owner/Cobaractor/Officer(s) of Corporation	License #	
Electrical Contractor Information: Electrical Cost \$	10,050	
Description of Work Win Service Size: Los Amps #T-Poles WES		
Michiga Bleeding German	919 634-4831	
Electrical Contractor's Company Name	Telephone	
731 Maky Dave Angier		
Address	Email Address	
John Markey	15077 W	
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Cost	License # 18 00 6 00	
	# Units_Z	
Comfort Sulvains	919 553 0266	
Mechanical Contractor's Company Name	Telephone	
2650 HW: 42 W Clayla 1/c 27520		
Address	Email Address	
Jahry Suil	15822	
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	

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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. 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: 7/ Ph Parke	Date: 11/9/2022	