

Application # ERESICI10-0009

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

* 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 for Residential Building and Trades Permit

Owner's Name: Everett Matthews	Date: 10 01 2019.
Site Address: 151 Th. WIISM LAND, DUNN 28	334 Phone:
Subdivision:	Lot:
Description of Proposed Work: Weyard S	
General Contractor Information	<u>on</u>
Building Contractor's Company Name	Telephone
Address	Email Address
License # Electrical Contractor Informati	on /
Description of Work Replace pole + Electrical Service Size	: 20 Amps T-Pole: Yes No
service frien Kelly + Company Inc.	919-779-4197
Electrical Contractor's Company Name	Telephone
220 A Tryon Rd. Rakigh NC 27403	Britnee. reallenkelly. con
Address 0972	Email Address
License #	
Mechanical/HVAC Contractor Infor	mation
Description of Work	
Mechanical Contractor's Company Name	Telephone
	Email Address
Address	Email Address
License #	
Plumbing Contractor Informat	<u>ion</u>
Description of Work	# Baths
	-
Plumbing Contractor's Company Name	Telephone
Address	Email Address
Address	Lindii Audiess
License #	
Insulation Contractor Informat	ion
Insulation Contracted Company Name 9 Address	Telephone
Insulation Contractor's Company Name & Address	relephone

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



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 that by signing below I have obtained all subcontractors permission to obtain these permits 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 as per current fee schedule.

Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: General Contractor Officer/Agent of the Contractor or Owner 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 world