



Application # _____

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Ernest Phil Holland Date: 5/19/2021
Site Address: 6180 Hwy 210 NORTH Phone: 919-210-4305
Subdivision: N/A Lot: _____
Description of Proposed Work: garage / STORAGE BUILDING Total Job Cost: 53,000.00

General Contractor Information

CAROLINA STRUCTURAL LLC 252-291-8023
Building Contractor's Company Name Telephone
4241 WILLIAMSON RD WILSON NC 27893 CAROLINASTRUCT@gmail.com
Address Email Address
53023 HEATED SQ FT N/A GARAGE SQ FT 2000
License #

Electrical Contractor Information

Description of Work wired building Service Size: 200 Amps T-Pole: Yes No
RST Electric 919-291-8766
Electrical Contractor's Company Name Telephone
3432 Zack Mill Rd. Angier, NC 27501 Solomonrst@gmail.com
Address Email Address
26202-i
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name Telephone _____
Address Email Address _____
License # _____

Plumbing Contractor Information

Description of Work plumb baths + kitchenette # Baths 1 + 1/2
Michael Ray Smith 919-639-3117
Plumbing Contractor's Company Name Telephone
109 Ablitzd Ln Angier, N.C. MSPMBG@gmail.com
Address Email Address
10200
License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone _____

***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.

[Handwritten Signature]

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

5-19-2021

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:

[Handwritten Signature]

Date:

5/20/2021