

NORTH CAROLINA

Application #

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;

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

## Application for Residential Building and Trades Permit

Owner's Name: Anthony Brown		Date: 1-6-2022
Site Address: 188 Olde Cypress Pt., Cameron, NC 28326 Subdivision:	. Dha	609-351-5120
Subdivision:  Description of Proposed Works set larger tank & run lines to	Pnone:	000-001-0129
Description of Proposed Work: set larger tank & run lines to generat	Lot:	
General Contractor Information	tion	
Building Contractor's Company Name	Telephone	
	relephone	
Address	Email Address	
License #	Ziridii Addi 685	
Description of Work Service Size	tion	
Service Size	e:Amps T-Po	le: UYes UNo
Electrical Contractor's Company Name	Tolonha	
· · · · · · · · · · · · · · · · · · ·	Telephone	
Address	Email Address	
II	Linaii Addiess	
License #		
Mechanical/HVAC Contractor Infort	mation	
Amerigas/James Christopher		
Mechanical Contractor's Company Name	910-220-4225	
117 Industrial Park Dr, Biscoe, NC 27209	Telephone	
Address	Patricia.Allison@a	merigas.com
20853	Email Address	
License #		
Plumbing Contractor Information	on I	
Description of Work		
	_# Baths	
Plumbing Contractor's Company Name	Telephone	
	relephone	
Address	Email Address	
License #		
Insulation Contractor Informatio	n	
nsulation Contractor's Company Name & Address		
Table & Addiess	Telephone	

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

Date: 1-6-2022



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 number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use 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 1-6-2022 fignature 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 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 Sight W/Little: