



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

0402-06-1895

Application for Residential Building and Trades Permit

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

Owner's Name: Brian T Millard Date 11 04 2022
Site Address: 590 Dickens Rd Broadway NC Phone 802 279 7309
Subdivision: _____ Lot _____
Description of Proposed Work: up grade electric to 200 Amps Total Job Cost 10000.00

General Contractor Information

Brian T millard 802 279 7309
Building Contractor's Company Name Telephone
self-owner therollingseed@peoplepc.com
Address Email Address
20978-L HEATED SQ FT 896 GARAGE SQ FT _____
License #

Electrical Contractor Information

Description of Work upgrade 200 Amp Service Size: 200 Amps T-Pole: Yes No
DBA Reid Taylor 919 842 9899
Electrical Contractor's Company Name Telephone
PO Box 82 Broadway N.C. reidTaylor1982@gmail.com
Address Email Address
20978-L
License #

Mechanical/HVAC Contractor Information

Description of Work up grade existing house to 200 Amp Service
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information

Description of Work _____ # Baths 1
Plumbing Contractor's Company Name Telephone
Address Email Address
License #

Insulation Contractor Information

Brian T millard - self 802 279 7309
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.

Brian Y Mullard
Signature of Owner/Contractor/Officer(s) of Corporation

11 04 2022
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: Brian Y Mullard

Date: 11 04 2022