*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

| Sprinkler Contractor Information | j |
|---|---|
| Sprinkler Contractor's Company Name | Telephone |
| Address | Email Address |
| Signature of Officer(s) of Corporation Fire Alarm Contractor Information | License # |
| 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? | ccess/Permit?YesNo |
| 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 | lication, that the application is correct ne Building, Electrical, Plumbing and I state the information on the above including listed contractors, site plan, ealth permit changes or proposed use unity Central Permitting Department of |
| any and all changes. Expired Permit Fees 6 months to 2 years permit re-issue fee is \$150.00. is charged at full price per current fee schedule. | 0.00. After 2 years re-issue fee |
| Signature of Owner/Contractor/Officer(s) of Corporation | 7 W 23 |
| Affidavit for Worker's Compensation N.C.G.S. The undersigned applicant being the: | N.C.G.S. 87-14 |
| General Contractor Owner Officer/Agen | 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: | or corporation(s) performing the v |
| Has three (3) or more employees and has obtained workers' compensation insurance to cover them. | npensation insurance to cover the |
| $\frac{}{}$ Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them. | s' compensation insurance to cov |
| Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves. | of workers' compensation insural |
| 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 count the work? | tood that the Central Permitting vorker's compensation insurance m any person, firm or corporation |
| Company or Name: Decisions Lections of Div | Tac. |
| Sign w/Title: Cff: Coffice Polynia | Date: 1 (4) 23 |



Lillington

North Carolina 27546

↑ 1. Head west toward S Main St

1 sec (43 ft)

Take US-421 S/US Hwy 421 S to Prospect Church Rd

9 min (7.5 mi)

→ 2. Turn right onto S Main St

1.5 mi

→ 3. Turn right onto US-421 S/US Hwy 421 S

6.0 mi

Continue on Prospect Church Rd to Red Hill Church Rd

8 min (5.2 mi)

← 4. Turn left onto Prospect Church Rd

3.3 mi

↑ 5. Continue onto Ashe Ave

1.9 mi

← 6. Turn left onto Red Hill Church Rd

1 min (1.1 mi)

Continue on 3 Bridge Rd to your destination

3 min (2.3 mi)

→ 7. Turn right onto 3 Bridge Rd

1.7 mi

→ 8. Turn right onto Fairground Rd

0.6 mi

→ 9. Turn right

154 ft

6208 Fairground Rd

Dunn, NC 28334