



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

Application for Residential Building and Trades Permit

Owner's Name: Rick Earnhardt Date: 1-2-19
Site Address: 4011 Sheriff Robinson Rd Phone: 919-422-5692
Subdivision: _____ Lot: _____
Description of Proposed Work: Pole Barn/Storage

General Contractor Information

Glenn Jones Inc 919-291-3475
Building Contractor's Company Name Telephone
PO Box 534 Fagun Valencia NC build4u2@gmail.com
Address 27526 Email Address
43503

Electrical Contractor Information

Description of Work Pole barn storage Service Size: 400 Amps T-Pole: Yes No
JAH Electric 919-422-5898
Electrical Contractor's Company Name Telephone
1117 Shannonda Dr Raleigh NC
Address 27603 Email Address
23304-2
License #

Mechanical/HVAC Contractor Information

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

Plumbing Contractor Information

Description of Work 1 Bath room # Baths 1
Ronald Lindsey Plumbing 919-910-658-7257
Plumbing Contractor's Company Name Telephone
464 Parkmill Rd Benson NC
Address 27504 Email Address
29636
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.

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

1-2-19
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: General Contractor [Signature]

Date: 1-2-19