



Shelters

THIS APPLICATION MUST BE FILED BY THE OWNER OR LICENSED CONTRACTOR. FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RESULT IN THE APPLICATION BEING DENIED.

Application # _____
Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7625 Fax 910-893-2793 www.harnett.org/permits
COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Roy and Rhonda Harrington Date: _____
Site Address: 79 Cortez Morrison Road Phone: 919-775-9511
Description of Proposed Work: Build 3 shelters and 2 buildings for produce market

General Contractor Information: Building Cost \$ 50,000

Consolidated Property Services 919-422-8404
Building Contractor's Company Name Telephone
108 Professional Court Garner N.C. 27529 mark@perma-boot.com
Address Email Address
66583
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information: Electrical Cost \$ 7,995

Description of Work wire buildings Service Size: 200 Amps #T-Poles _____
Kenz-Pay Electric 919-398-8790
Electrical Contractor's Company Name Telephone
120 Covered CT Clayton N.C. 27527 cornellchristy@yahoo.com
Address Email Address
21995-L
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work install bath fans and heat in 1 building # Units 1
919-553-0266
Mechanical Contractor's Company Name Telephone
Address jsmith@comfortonline.com
Email Address
15822
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information: Plumbing Cost \$ 1,000.00

Description of Work install Bathroom plumbing # Baths 4
919-639-6201
J.C. Wilkins plumbing Telephone
840 Massingill Pond Road Willow Spring N.C. Joey@wilkinsplumbing.com
Address Email Address
L.10421
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

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



Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____

Fire Alarm Contractor Information

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? Yes No

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 any and all changes.

~~Expired Permit Fee: 6 months to 2 years permit re-issue fee is \$100.00. After 2 years re-issue fee is charged at full rate per contract fee schedule.~~

Signature of Owner/Contractor/Officer(s) of Corporation _____ *[Signature]* Date 7/7/2022

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: *[Signature]* _____ Date: 7/12/22