

Application # \_\_\_\_\_

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

## **Application for Residential Building and Trades Permit**

	Owner's Name: Mary Nust	Date 5/20/22  LakulPhone 9/9 418 4330	
	Site Address: 710 Greorge West In Spring	LakelPhone 919 418 4330	
	Subdivision:	Lot	
	Description of Proposed Work: YUbuld after fire	_ Total Job Cost \$15,000	
General Contractor Information			
	Cary Reconstruction Co.	910-487-5517	
	Building Contractor's Company Name	Telephone	
	2046 SKIDD Rd Fay NC 28814	bridgeto jackson (o call venturi	
	Address	Email Address	
	12442 HEATED SQ FT GARAGE SC		
	License #		
Description of Work YUNIVE DUBY Service Size: Amps T-Pole: Yes No			
	Grains Hra & Air	010-043-1220	
0.0		Telephone	
rons	14127 Magon wheel to shannon	Totophono	
60,	Address	Email Address	
V	29042 MC		
	License #		
Mechanical/HVAC Contractor Information			
	Description of Work <u>+UN YUD OCEMENT OF OUCH MOY</u> K		
J.	Dulchills	910-322-5113	
Mon Con	Mechanical Contractor's Company Name	Telephone	
" de	175 Dowfield Dr Fauetteville	overhillsheating and air	
tra	Address	Email Address @ gmail. Com	
. `	2410U	a grian.	
License #			
Plumbing Contractor Information			
0	Description of Work Minimal Dumbing	_# Baths	
78	Plumbing by BFW	910-920-0948	
00	Plumbing Contractor's Company Name	Telephone	
17	559 Gillespie St Jayetteville NC		
6	Address ( )	Email Address	
	<u>5015d</u>		
	License #  Insulation Contractor Informatio	n	
	Cumberland Inculation	<u>"</u> 910-484-7118	
	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

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

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:\_\_\_