

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: Gregory Inc Date: 5-12-2020
 Site Address: 752 Butts Rd Phone: 919-422-8130
 Subdivision: Poole Lot: 1
 Description of Proposed Work: New House Total Job Cost: \$119K

General Contractor Information

Gregory Inc Telephone: 919-422-8130
 Building Contractor's Company Name
500-A N. Raleigh St Email Address: Gregoryinc1anman@gmail.com
 Address
36220
 License #

Electrical Contractor Information

Description of Work: New House Service Size: 200 Amps T-Pole: Yes No
D2 Electric Telephone: 910-723-3242
 Electrical Contractor's Company Name
100 Hidden Creek Ln Email Address
 Address
24311-L Lillington, NC 27546
 License #

Mechanical/HVAC Contractor Information

Description of Work: New House
Polar Bear Heating & Air Telephone: 910-984-0059
 Mechanical Contractor's Company Name
P.O. Box 981 Coats 27521 Email Address
 Address
30048
 License #

Plumbing Contractor Information

Description of Work: New House # Baths: 2
BARNES Plumbing Telephone: 919-422-2133
 Plumbing Contractor's Company Name
239 Millwood Ln Email Address
 Address
 License #

Insulation Contractor Information

Insulating Inc Telephone: 919-772-9000
 Insulation Contractor's Company Name & Address

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

5-12-2020
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.

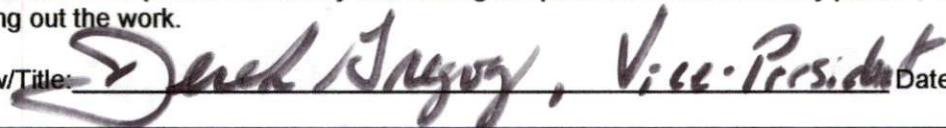
_____ Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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:

 Vice-President Date: 5-12-2020