

Application #

\* 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. Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## Application for Residential Building and Trades Permit

Owner's Name: Thon & Catherin Tutor	Date: 5	18/2020
Site Address: 92 Florence Pinus Ct Figurey Version 1	JC Phone: 919 -	868-4701
Subdivision: Florence Piny	Lot: 5	5 100
Description of Proposed Work: SF 0	Total Job Cost: 400,	000
General Contractor Information		
Olymport Frillers	919-868-4202	
Building Contractor's Company Name	Telephone	
1757 Oakridge Dunen Rel IV NC 27524	For @ gler wood	11.
Address	Email Address	builds ive
11.13.04		
License #		
Description of Work SEO	A TD1	
Masov's Fleeburd Scripe	Amps T-Pole:	
Masny's Electrical Scrice  Electrical Contractor's Company Name	919-639-483	7
Address Address	Telephone	
Address	Empil Address	
15077	Email Address	
License #		
Mechanical/HVAC Contractor Information		
Description of Work		
Mechanical Contractor & Company Name  1539 Wasle Stephenser Rel Holly Springs N( Address	919-552-305	3
Mechanical Contractor Company Name	Telephone	3
1539 Wade Stephenser Rd Holly Spring All	· olophone	
	Email Address	
15622	- ridii riddiess	
License #		
Description of Work	2	
P. A. DI	# Baths 4	
Rushing Plumbing LLL Plumbing Contractor's Company Name	919-243-0246	
7581 N7 Alkana 3 and 6 Alkana 3 and	Telephone	,
Address NZ Hwy 210 Smithfill		
	Email Address	
33242 License #		
Insulation Contractor Information  Insulation Contractor's Company Name & Address		
Insulation Contractor's Company Name & Address	919-772-9000 Telephone	)
	elephone	

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

strong roots • new growth



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

Affidavit for Worker's The undersigned applicant being the:	Compensation N.C.G.S. 87-14
General Contractor Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that set forth in the permit:	the person(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has o	obtained workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and them.	has obtained workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who covering themselves.	has their own policy of workers' compensation insurance
Has no more than two (2) employees and r	no subcontractors.
Department issuing the permit may require certific	is sought it is understood that the Central Permitting sates of coverage of worker's compensation insurance prior the permitted work from any person, firm or corporation
Sign w/Title: Oranu	Date: