

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

Date: 9/8/2020
Phone: 910-892-1231
Lot:
Total Job Cost: <u>124,000.00</u>
ormation
910-892-1231
Telephone
STEVEJERNIGAN58@OUTLOOK.COM
Email Address
f <u>ormation</u> ce Size: <u>200 </u> Amps T-Pole: <u>× </u> Yes <u> N</u> o
910-820-0837
Telephone
jhpelectrical@hotmail.com
Email Address
or Information
910-897-5501
Telephone
Telephone jandmhvac@centurylink.net
Telephone
Telephone jandmhvac@centurylink.net
Telephone jandmhvac@centurylink.net Email Address
Telephone jandmhvac@centurylink.net Email Address
Telephone jandmhvac@centurylink.net Email Address formation # Baths_2
Telephone jandmhvac@centurylink.net Email Address formation # Baths 2 910-567-6361
Telephone jandmhvac@centurylink.net Email Address formation # Baths_2 910-567-6361 Telephone
Telephone jandmhvac@centurylink.net Email Address formation # Baths 2 910-567-6361 Telephone gpci@intrstar.net
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Telephone jandmhvac@centurylink.net Email Address formation # Baths 2 910-567-6361 Telephone gpci@intrstar.net Email 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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

Timothy M. Tart

9/8/2020

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

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

_____ General Contractor _____ Owner X ____ 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.

X 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:	Timothy M. Tast	_{Date:} 9/8/2020
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