

* Each section below to be filled out by whomever performing work. Must be owner/occupier 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

don on license.	
Owner's Name: STRICKLY - COMPANY LLL Site Address: 106 MORGAN ST	Date: 2/1/2/
Site Address: 100 MORGAN ST	Phone: 916-890-2160
Subdivision: Murgan ST.	Lot:
Description of Proposed Work: 3 BR / Z RU Home	Total Job Cost: ¶ 100,000 °0
General Contractor Information	
FRIAMIN AN CARLLY A 10	910 00 0110
DERLEMY M STRICKLAND Building Contractor's Company Name 1330 LANE RD. DUNN, NC 28334 Address	Telephone
1330 LANE RD. DUNN NC 28334	instack akper langer
Address	Email Address
HEATED SQ FT 1300 GARAGE S	QFT ~/A
License #	
Description of Work NEW Electrical Contractor Information Service Size:	<u>n</u>
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RST EIECTRIC	<u>919 - 29/ - 8766</u> Telephone
Electrical Contractor's Company Name	Telephone
3432 ZACKS MILL RO ANGIGR NC 27501	
Address	Email Address
26202-1	
License #	
Mechanical/HVAC Contractor Information	
Description of Work NEW HVAC	
PANDY IFF TAVION	910-742-2941
RANDY LET TACKSON Mechanical Contractor's Company Name	910-242-294/ Telephone
100 N, 13th ST SUITE ISW ERWIN NO Address 28379	Теюрнопе
Address	Email Address
H-3-1 18512 28379	Linali Address
License #	
Plumbing Contractor Information	
Description of Work NEW Plymbia	
JEREMY WILLIFORD	919-915-0533
Plumbing Contractor's Company Name	Telephone
865 JERMILAN LOOP RD. DUNN NC 2833Y	relephone
Address	Email Address
30747	Email / Idai 033
License #	
Insulation Contractor Information	
PACKER BROS TNC	910-990-5928
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 bermission 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.

2/1/21 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: