

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

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: Signature Home Builders	Date _!\/26/21_
Site Address: A Hawks Croft Ct. Erwin NC 28339	Phone (NO cook Cook
Subdivision: Willamsed	Lot _11
0.5	_ Total Job Cost 275,000
General Contractor Information	
Signature Home Ruilders	
Building Contractor's Company Name	<u>410 - 892 - 9299</u> Telephone
Address  1209 N. Man St Lillington NC 27540	C sherrock sh by amile (8) Email Address
HEATED SQ FT 1850 GARAGE SC	
License #	
Description of Work <u>{ le ctrical Contractor Information</u> Service Size: <u>200</u> Amps T-Pole: Yes No	
Doilvier Enterorises Tor	919 - 3377 - 76 33
Electrical Contractor's Company Name	Telephone_
Address	30
17046-11	Email Address
License #	
Mechanical/HVAC Contractor Information	
Description of Mark. Ass. 4 c	
Mechanical Contractor's Company Name  Mechanical Contractor's Company Name  Address  Address	919-725-6453
Mechanical Contractor's Company Name	Telephone
Address St. Clayton NC 27520	Radfordhuac @ amilion
20014	Email Address
License #	
Plumbing Contractor Information	
Description of Work	_# Baths
Like Glover Plumbing	9A-820-0026
Plumbing Contractor's Company Name	Telephone
P.D. Box Mot Benson NC 27504 Address	
7958	Email Address
License #	
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	910-484-7118
	Telephone

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

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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 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: Christoph D. Slul Project Manager Date: 11/26/21	