

* 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
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910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Josh & Halvy Jernican	2. 11-1-21
Owner's Name: Josh : Halvy Jernigan Site Address: OK Stage Rd S. Erwin NC Subdivision:	Date [[-] &\
	Lot
Description of Proposed Work: New Const	
Serenity Built Humes, Inc. Building Contractor's Company Name	
PO Box 1417 Lillington NC 27546 KLawr	Telephone
Address Address	Email Address
63787	Email Address
License #	50.22
Description of Work New Const Service Size	on
Maby's Electrical Service Size	: 200_Amps T-Pole: X_YesNo
Electrical Contractor's Company Name	919-639-4837
73 Mabry RZ Angier NC 27501	Telephone
Address Address	
150174	Email Address
License #	
Mechanical/HVAC Contractor Inform	mation
Description of Work New Const	
J', M	910-897-5501
Mechanical Contractor's Company Name	Telephone
	· elepitoric
Address Address Turlington R2 Dunn NC 28334	. S. Sprione
Address Address	Email Address
Address 17164	•
Address 17164 License #	Email Address
Address 17164 License # Plumbing Contractor Information	Email Address
Address 17164 License # Plumbing Contractor Information Description of Work New Const	Email Address on # Baths_2
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name	Email Address on # Baths 2 910 - 892 - 473 %
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name	Email Address on # Baths_2
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name 5476 Timothy R2 Dunn NC 28334 Address	Email Address on # Baths 2 910 - 892 - 473 6 Telephone
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name 5476 Timothy Rd Dunn 100 28334 Address 20694 P-1	Email Address on # Baths 2 910 - 892 - 473 %
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name 5476 Timothy Rd Dunn NC 28334 Address 20694 P-1 License #	Email Address on # Baths_2 910 - 892 - 473 Telephone Email Address
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name 5476 Timothy Rd Dunn NC 28334 Address 20694 P-1 License # Insulation Contractor Information	Email Address on # Baths 2 G10 - 892 - 473 6 Telephone Email Address
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name 5476 Timothy Rd Dunn 100 28334 Address 20694 P-1 License # Insulation Contractor Information Insulation Contractor's Company Name Raleigh NL Insulation Contractor's Company Name Raleigh NL	Email Address on # Baths_2 910 - 892 - 473 Telephone Email Address
Address 17164 License # Plumbing Contractor Information Description of Work New Const Jason Baretoot Plumbing Contractor's Company Name 5476 Timothy Rd Dunn NC 28334 Address 20694 P-1 License # Insulation Contractor Information	Email Address on # Baths 2 G10 - 892 - 473 6 Telephone 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 **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 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

The unders	Affidavit for Worker's Compensation N.C.G.S. 87-14 igned applicant being the:
Y G	neral Contractor Owner Officer/Agent of the Contractor or Owner
Do hereby set forth in	confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work 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
Has covering the	one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance emselves.
Has	no more than two (2) employees and no subcontractors.
Departmen	ng on the project for which this permit is sought it is understood that the Central Permitting issuing the permit may require certificates of coverage of worker's compensation insurance prior of the permit and at any time during the permitted work from any person, firm or corporation the work.
Sign w/Title	Date: 1-21