

Application #

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

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

Date <u>1/25/2022</u>
Phone <u>9192333886</u>
Lot
Total Job Cost <u>\$225225.00</u>
<u>mation</u>
9192333886
Telephone
_Raleigh_PlanReview@mattamycorp.com
Email Address
GARAGE SQ FT 475
<u>rmation</u>
e Size:Amps T-Pole: <u>yes</u> YesNo
9193637474
Telephone
campomizzi@mindspring.com
Email Address
Information
9196832421
Telephone
тегернопе
Email Address
Email / Nacross
rmation
Baths
9195334455
Telephone
Email Address
ormation
9194536411 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 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.

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The state of the s	ermit re-issue fee is \$150.00. After 2 years re-issue fee
is as per current fee schedule.	
Andrew Broke	1/25/2022
Signature of Owner/Contractor/Officer(s) of Corpor	ration Date
Affi do di fon Mondonio	O N O O O O 7 44
	Compensation N.C.G.S. 87-14
The undersigned applicant being the:	
General Contractor Owner _	Officer/Agent of the Contractor or Owner
	the person(s), firm(s) or corporation(s) performing the work
set forth in the permit:	
Has three (3) or more employees and has o	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.	That their own pelicy of workers compensation incuration
•	
Has no more than two (2) employees and n	o subcontractors.
While working on the project for which this permit i	s sought it is understood that the Central Permitting
	ates of coverage of worker's compensation insurance prior
	e permitted work from any person, firm or corporation
carrying out the work.	
Sign w/Title:	_ Date: