



strong roots • new growth

CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

COMMERCIAL BUILDING APPLICATION

Site Address: 22 Sir David Way PIN: 0630-61-1030

Owner: Dream Finders Homes Phone: 9104864864 Email: tamaragreen@dreamfindershomes.com

Description of Proposed Work: Sales Center in Garage Total Job Cost: \$ 12808

Temporary - Will be removed
GENERAL CONTRACTOR INFORMATION

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

Dream Finders Homes LLC
General Contractor's Company Name
3709 Raeford Rd Ste 200
Address
99501
License #
Jammy Green
Signature of Owner/Contractor/Officer of Corp.

910-486-4864
Phone
tamaragreen@dreamfindershomes.com
Email
\$ 8728.00
Building Cost (excluding trades)

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: plugs in sales area
JM Pope Electric
Electrical Contractor's Company Name
409 Chatham St Sanford NC
Address
21326
License #
Jammy Green
Signature of Owner/Contractor/Officer of Corp.

Service Size: 200 Amps T-Poles: YES NO
919-776-5144
Phone
electricpope@windstream.net
Email
\$ 580.00
Electrical Cost

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: mini split system
Caryl Mechanical
Mechanical Contractor's Company Name
1041 Van Buren Ave Indian Trail NC
Address
22084
License #
Jammy Green
Signature of Owner/Contractor/Officer of Corp.

of Units: 1
704-882-4522
Phone
Email
\$ 3500
Mechanical Cost

PLUMBING CONTRACTOR INFORMATION

Description of Work: NO Plbg in Sales Center
Plumbing Contractor's Company Name
Address
License #
Signature of Owner/Contractor/Officer of Corp.

of Baths: _____
Phone
Email
\$ _____
Plumbing Cost

REFRIGERATION CONTRACTOR INFORMATION

Refrigeration Contractor's Company Name
Address
License #
Signature of Owner/Contractor/Officer of Corp.

NONE
Phone
Email
Signature of Owner/Contractor/Officer of Corp.

APPLICATION CONTINUES ON BACK



SPRINKLER CONTRACTOR INFORMATION

Sprinkler Contractor's Company Name NONE Phone _____
 Address _____ Email _____
 License # _____ Signature of Owner/Contractor/Officer of Corp. _____

FIRE ALARM CONTRACTOR INFORMATION

Fire Alarm Contractor's Company Name NONE Phone _____
 Address _____ Email _____
 License # _____ Signature of Owner/Contractor/Officer of Corp. _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? YES NO

I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Jamara Green _____ 3.31.26 _____
 Signature of Owner/Contractor/Officer of Corp. 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

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- Has 3 or more employees and has obtained workers' compensation insurance to cover them,
- Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,
- Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,
- Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

Jamara Green _____ 3.31.26 _____
 Signature of Owner/Contractor/Officer of Corp. Date