



Application # Bres2003-0053

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Oscar Garcia Date: 3-13-20  
Site Address: 105 3rd st Elmina NC Phone: 9842859216  
Subdivision: N-A Lot: N-A  
Description of Proposed Work: addition on back of house Total Job Cost: 53,000

**General Contractor Information**

Vogt Contracting 919 888 1619  
Building Contractor's Company Name Telephone  
6437 Mal Weathers Rd Raleigh zcvogt7@gmail.com  
Address Email Address  
81734  
License #

**Electrical Contractor Information**

Description of Work new outlets Service Size: \_\_\_\_\_ Amps T-Pole: Yes  No  
Kenz-Pay Electric 919 398 8790  
Electrical Contractor's Company Name Telephone  
120 Covered Ct Clayton NC cornellchristy@yahoo.com  
Address Email Address  
21955-6  
License #

Spoke to Charity Vogt  
no mechanical

**Mechanical/HVAC Contractor Information**

Description of Work HVAC For addition  
Adams Service Co Adam Beauty 919 912 0287 3/25/2026  
Mechanical Contractor's Company Name Telephone  
405 Homestead Dr Selma NC 27576 Beautyadam1@gmail.com  
Address Email Address  
32331  
License #

**Plumbing Contractor Information**

Description of Work new vanity + toilet # Baths 1  
904 broadhaven dr Raleigh NC 27603 919 384 5182  
Plumbing Contractor's Company Name Telephone  
Vans Plumbing LLC dmoran32@nc.rr.com  
Address Email Address  
13221  
License #

**Insulation Contractor Information**


Insulation Pros 919 554 9004  
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 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

3-18-20  
 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: 

GC Date: 3-18-20