



Application # \_\_\_\_\_

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

**Application for Residential Building and Trades Permit**

Owner's Name: DAVID + Kelly Murphy Date: 12/3/2020  
Site Address: 41 WOODLAND RIDGE DR Phone: 919 414-4527  
Subdivision: WOODLAND RIDGE Lot: \_\_\_\_\_  
Description of Proposed Work: Kitchen Addition Total Job Cost: 50K

**General Contractor Information**

J's Electric & CONTRACTING / JD CONLEY / SCOTT CONCORAN (919) 796-0869  
Building Contractor's Company Name PM Telephone  
2229 WADE NASH HOLLY SPRINGS NC, 27540 EVL800@EARTHLINK.NET  
Address Email Address  
63523 **HEATED SQ FT 226 GARAGE SQ FT**  
License #

**Electrical Contractor Information**

Description of Work Elect Rough + TRIM Service Size: 200 Amps T-Pole: Yes  No  
J's Electrical (919) 552-9351  
Electrical Contractor's Company Name Telephone  
2229 WADE NASH Holly Springs NC  
Address 27540 Email Address  
25612-U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work Mech Residential / Duct work  
Quality AIR SERVICES 919 427-8934  
Mechanical Contractor's Company Name Telephone  
5208 Spring Farm RD Raleigh NC  
Address 27603 Email Address  
13367 Class 1  
License #

**Plumbing Contractor Information**

Description of Work Plumbing Rough + Trim Residential # Baths: 0  
CAMDENS Plumbing + Repair 919 669-4650  
Plumbing Contractor's Company Name Telephone  
PO BOX 1359 FURQUAY VARINA NC  
Address 27524 Email Address  
18903  
License #

**Insulation Contractor Information**

Palomo INSULATION (919) 369-3770  
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.

*Stella M. Covoran*  
Signature of Owner/Contractor/Officer(s) of Corporation

12/14/2020  
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: *Stella M. Covoran* *Project Manager* *J's Electric/J's CONTRACTING* Date: 12/14/2020