

Application #

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546

* 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. PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: A&G Residential, LLC	Date:
	Phone:
Subdivision:	
Description of Proposed Work: New Single Family Construction	
General Contractor Inform	nation
A&G Residential, LLC	910-779-0229
Building Contractor's Company Name	Telephone
916 Arsenal Ave Suite B Fayetteville, NC 28305	jenn@agresidentialnc.com
Address	Email Address
80672 HEATED SQ FT 1981 GARAC	GE SQ FT 250
License #	
Description of Work Single Family Electric Service S	
•	
Ogilvie Enterprises, Inc	919-337-7633 Telephone
Electrical Contractor's Company Name	·
5325 Hidwell Place Apex, NC 27539 Address	ogilvieelectric1994@gmail.com Email Address
	Email Address
17046-U License #	
Mechanical/HVAC Contractor II	nformation
Description of Work Single Family HVAC	
Carolina Comfort Air	010 220 2274
Mechanical Contractor's Company Name	910-339-2374 Telephone
• •	•
703 N. Clinton Ave Dunn, NC 28334 Address	RNC_Fayetteville@carolinacomfortair.con Email Address
29077 H3-1	Email Address
License #	
Plumbing Contractor Inform	mation
Description of Work Single Family Plumbing	
Titan's Plumbing, LLC	919-615-1947
Plumbing Contractor's Company Name	Telephone
1634 Brock Fern Way Raleigh, NC 27609	business@titansplumbing.com
Address	Email Address
34800	
License #	
Insulation Contractor Inform	<u>mation</u>
Tricity Insulation 3154 Camden Rd. Fayetteville NC 28306	910-486-8855
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.

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 sched	ule.		
John h	Jaaner	06/20/2021	
Signature of Owner/Contra	<i>lagner</i> ctor/Officer(s) of Corporation	06/29/2021 n Date	
Signature of Owner/Contra	ctor/Onicer(s) or Corporation	1 Date	
Λ ff i.	dovit for Worker's Cor	mnoncotion N.C.C.S. 97.44	
		npensation N.C.G.S. 87-14	
The undersigned applicant	being the.		
General Contracto	or Owner X	Officer/Agent of the Contractor or Owner	
	· •	Omioon, tigorit or the Contractor of Chines	
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work			
set forth in the permit:			
X 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.			
v Has and (1) or more	subcontractors(s) who has	their own policy of workers' componentian incurance	
X Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.			
covering memserves.			
Has no more than two (2) employees and no subcontractors.			
Tras no more trainty	vo (2) employees and no sal	boont actors.	
While working on the project	ct for which this permit is sou	ught it is understood that the Central Permitting	
		of coverage of worker's compensation insurance prior	
		rmitted work from any person, firm or corporation	
carrying out the work.			
	January 1.1	0.610.010.02.1	
Sian w/Title:	Jenn Wagner	Date: 06/29/2021	