



Application # _____

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

* 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: Kiana Gardner Date _____

Site Address: 200 oakhaven dr HS. 27540 Phone _____

Subdivision: _____ Lot _____

Description of Proposed Work: _____ Total Job Cost 45,000

General Contractor Information

Select custom builders llc 919-819-0297
Building Contractor's Company Name Telephone

2474 walnut st Cary, #225 27518 tre @ Schwabe
Address Email Address

78279 HEATED SQ FT GARAGE SQ FT
License #

Electrical Contractor Information

Description of Work Add rec for Frige Service Size: 200 Amps T-Pole: Yes No
Raw Tech FCB Meter

Electrical Contractor's Company Name Telephone 919-422-3519

Address 17889-U rawtechindustry@gmail.com
License # Email Address

Mechanical/HVAC Contractor Information

Description of Work NA

Mechanical Contractor's Company Name Telephone _____

Address Email Address _____

License # _____

Plumbing Contractor Information

Description of Work outdoor sink # Baths _____

AH Plumbing 919-622-0559
Plumbing Contractor's Company Name Telephone

Address 29375 ahandy
License # Email Address

ahandyplumbing@gmail.com

Insulation Contractor Information

Insulation Contractor's Company Name & Address NA Telephone 919 622 0559

***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.

William H. Allen III 5-20-22
Signature of Owner/Contractor/Officer(s) of Corporation 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: William H. Allen III Date: 5-20-22