



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: Jeff and Gentry Doggendorf Date: 7/21/2022

Site Address: 104 Lonnie Betts Drive Holly Springs, NC 27540 Phone: 316-650-6897

Subdivision: Austin Farms Lot: 7

Description of Proposed Work: Detached garage w/ covered porch and bathroom Total Job Cost: \$70,000

**General Contractor Information**

Clement L. McDaniel, Jr.

919-562-8313

Building Contractor's Company Name

Telephone

3312 Black Stallion Ct. Zebulon, NC 27597

hwsgarages@gmail.com

Address

Email Address

76637

**HEATED SQ FT**

**GARAGE SQ FT**

License #

**Electrical Contractor Information**

Description of Work Shed - lights, outlets, etc. Service Size: \_\_\_\_\_ Amps T-Pole: Yes No

Holt Electrical (Jerry Scott Holt)

919-770-1632

Electrical Contractor's Company Name

Telephone

327 Tramway West Road Sanford, NC 27330

holtelectrical20@gmail.com

Address

Email Address

22298-L

License #

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_

Mechanical Contractor's Company Name

Telephone

Address

Email Address

License #

**Plumbing Contractor Information**

Description of Work Bathroom in Shed # Baths 1

Zimmerman's Plumbing LLC

919-370-1956

Plumbing Contractor's Company Name

Telephone

7429 Saunders Rd Willow Spring, NC 27592

szimmermanplumbing@gmail.com

Address

Email Address

30514

License #

**Insulation Contractor Information**

Gentry Doggendorf - Owner

Telephone

Insulation Contractor's Company Name & Address

**\*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.**

Gentry Doggendorf  
Signature of Owner/Contractor/Officer(s) of Corporation

7/21/2022  
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: Gentry Doggendorf Date: 7/21/2022