



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: Frankie McKoy Date: _____
Site Address: 4001 TRAVERSE DRIVE Phone: 919-272-0658
Subdivision: _____ Lot: _____
Description of Proposed Work: _____ Total Job Cost: _____

General Contractor Information

Johko Contracting Telephone: 919-369-7240
Building Contractor's Company Name
8911 Elizabeth Bennet Pl. Email Address: JohandGriffith2@gmail.com
Address
76373 HEATED SQ FT 338 GARAGE SQ FT 676
License #

Electrical Contractor Information

Description of Work wire garage Service Size: _____ Amps T-Pole: Yes No
Chris McCabe Telephone: 919-901-9523
Electrical Contractor's Company Name
Deploy Electric and Ranger Email Address: _____
Address
31110-1
License #

Mechanical/HVAC Contractor Information

Description of Work Hvac R us mini split system
Aron Walker Telephone: 919-677-7878
Mechanical Contractor's Company Name
Hvac R us Email Address: _____
Address
18423
License #

Plumbing Contractor Information

Description of Work Plumb on 2 bath # Baths 1
Central Carolina Plumbing Telephone: 919-799-8343
Plumbing Contractor's Company Name
517 Derby Pl. Zebulon NC. Email Address: centralcarolinaplumbingllc@yahoo.com
Address
32950
License #

Insulation Contractor Information

Will Cee Insulation Telephone: 919-457-3989
Insulation Contractor's Company Name & Address
8813 Gulf Ct. St-D Raleigh NC.

*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.

Johnny Griffith
Signature of Owner/Contractor/Officer(s) of Corporation

10/1/22
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: Johnny Griffith

Date: 11/1/22