



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: Amanda Martinez Date 4-24-23
Site Address: 364 Spring Hill Church Rd, Sanford, NC 27546 Phone 219-707-7490
Subdivision: _____ Lot _____
Description of Proposed Work: 25x30 Gym/Storage Total Job Cost 62,000

General Contractor Information

J.A. Hart Construction, Inc 919-777-0999
Building Contractor's Company Name Telephone
3408 Lee Ave Sanford NC 27332 sharncoe@jahartconstruction.com
Address Email Address
81140 HEATED SQ FT _____ GARAGE SQ FT 750
License #

Electrical Contractor Information

Description of Work Wire Lights Service Size: _____ Amps T-Pole: Yes No
Cerna Electric 919-888-2492
Electrical Contractor's Company Name Telephone
2205 Wimberly Woods Dr, Sanford NC 27330 cernaelectric.jc@gmail.com
Address Email Address
U.32868
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

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.


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

4-25-23
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:  owner Date: 4-25-23

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1904106

Filed on: 6
Initially fil

Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com (<http://www.liensnc.com>)

Address: 223 S. West Street, Suite 900 /
Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (<mailto:support@liensnc.com>)

Project Property

0518-72-8174.000
364 Spring Hill Church Rd
Sanford, NC 27546
Harnett County

Property Type

1-2 Family Dwelling

Print & Post



Contractors:

Please post this notice on

Suppliers and Subcont

Scan this image with you
phone to view this filing.
file a Notice to Lien Agen
project.

Owner Information

Amanda Martinez
364 Spring Hill Church Rd
Sanford, NC 27546
United States
Email: sssparks1984@gmail.com
Phone: 219-707-7490

View Comments (0)

Technical Support Hotline: (888) 690-7384