



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: Joseph Naylor Date 1/27/23
Site Address: 5221 Old Stage Rd. N Angier NC 27561 Phone 919-754-7315
Subdivision: _____ Lot _____
Description of Proposed Work: Finish Bonus Room Total Job Cost 40,000.00

General Contractor Information

Joey Ferrell, Inc. (919) 422-8408
Building Contractor's Company Name Telephone
313 Culbert St Apex NC 27502 jferrell2@att.net
Address Email Address
57876 HEATED SQ FT 450 GARAGE SQ FT
License #

Electrical Contractor Information

Description of Work wire bonus room Service Size: _____ Amps T-Pole: Yes No
Prevette Electric (919) 279-0693
Electrical Contractor's Company Name Telephone
105 N Carver St Raleigh NC 27610
Address Email Address
32301
License #

Mechanical/HVAC Contractor Information

Description of Work Install mini-split system for bonus room
Home Owner Joseph Naylor
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information

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

Insulation Contractor Information

Friend's Insulation, LLC (919) 291-2438
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.

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

1/27/23
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: Joy Laurel President Date: 1/27/23