



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: TRevel construction Date 12/6/22
Site Address: 414 Young Rd Angier Phone 919-669-4904
Subdivision: _____ Lot _____
Description of Proposed Work: Single Family Home Total Job Cost 250,000.00

General Contractor Information

TRevel construction 919-669-4904
Building Contractor's Company Name Telephone
8421 Wyndridge Dr Apex NC 27539 TRevel67@aol.com
Address Email Address
73789 HEATED SQ FT 1807 GARAGE SQ FT 543
License #

Electrical Contractor Information

Description of Work _____ Service Size: 200 Amps T-Pole: Yes No
Imperial Electric 919-363-7474
Electrical Contractor's Company Name Telephone
PO Box 162 Apex 27502 office@imperialelectric
Address Email Address
19850-L
License #

Mechanical/HVAC Contractor Information

Description of Work New HVAC
KMT Heating & Air 919 274-7224
Mechanical Contractor's Company Name Telephone
756 St George Rd Km@KMT-hvacpros.com
Address Email Address
32882
License #

Plumbing Contractor Information

Description of Work new Plumbing # Baths 2
alliance Plumbing 919-422-8217
Plumbing Contractor's Company Name Telephone
5127 Wildespan Dr Clayton 27520 allianceplumbing@gmail
Address Email Address
8931 P1
License #

Insulation Contractor Information

Prime Energy 919-608-8311
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

12/6/22

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:  President Date: 12/6/22