

Detached
Barn



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

Application # _____

* 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: Phil & Shirley Rodgers Date 9/17/23
Site Address: 330 Mabry Rd. Angier NC 27501 Phone 919 623 3079
Subdivision: _____ Lot ✓
Description of Proposed Work: New Detach Garage Total Job Cost 150,000

General Contractor Information

Stephenson Builders Inc Telephone 919 730 7802
Building Contractor's Company Name
460 Ausley Rd. Fayetteville NC 27504 Email Address drew@stephensonbuilders.com
Address
53604 HEATED SQ FT 589 GARAGE SQ FT 1091
License #

Electrical Contractor Information

Description of Work New Detach Garage Service Size: 200 Amps T-Pole: Yes No
Dean Electric LLC ↳ from House 919 669-0063
Electrical Contractor's Company Name Telephone
2793 Baphs Grove Rd. Fayetteville Email Address
Address
L 29839
License #

Mechanical/HVAC Contractor Information

Description of Work ~~REPAIR~~ New Home
JC HVAC Telephone 919 552 3053
Mechanical Contractor's Company Name
1539 Wade Stephenson Rd. Email Address
Address
12655
License #

Plumbing Contractor Information

Description of Work ① New Garage w 1 1/2 Baths # Baths 1 1/2
Carney Plumb & Repair Telephone 919 557 1584
Plumbing Contractor's Company Name
7229 Village Dr. Angier 27504 Email Address
Address
18903
License #

Insulation Contractor Information

Stephens Bulky Supply Telephone 919 630 8365
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.

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

Date

9/13/23

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:

Date:

[Signature] *President*

9/13/23