



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

CHANGE REQUEST

Application for Residential Building and Trades Permit

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Owner's Name: Erica Anderson Date 1/23/2024
Site Address: 1806 Ball Rd Phone 919-610-5126
Subdivision: N/A Lot _____
Description of Proposed Work: finished basement Total Job Cost _____

General Contractor Information

Starcraft Custom Building, 919-369-1228
Building Contractor's Company Name Telephone
5817 Brayton Park Pl, Holly Springs jason@starcraftbuilders.com
Address Email Address
48360 **HEATED SQ FT 1728** **GARAGE SQ FT** 0
License #

Electrical Contractor Information

Description of Work basement electrical Service Size: _____ Amps T-Pole: Yes No
GO Electric 919-886-3727
Electrical Contractor's Company Name Telephone
341 Queens Rd, Sanford NC 27330 goelectric.nc@gmail.com
Address Email Address
33993
License #

Mechanical/HVAC Contractor Information

Description of Work for HVAC in basement
Thermal Waves Mechanical LLC 919-427-1319
Mechanical Contractor's Company Name Telephone
203 Wellington Dr, Knightdale knightdaleHVAC@gmail.com
Address Email Address
34406
License #

Plumbing Contractor Information

Description of Work Plumbing # Baths 1
Thornton's Plumbing 919-550-4833
Plumbing Contractor's Company Name Telephone
3160 Vinson Rd, Clayton thorntons@embargmail.com
Address Email Address
22152
License #

Insulation Contractor Information

Insulation Service's 919-478-7464
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.

J. B.
Signature of Owner/Contractor/Officer(s) of Corporation

1/23/2024
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:

- J. B.* Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
- J. B.* Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.
- J. B.* Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.
- J. B.* 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: *J. B. GC* Date: 1/29/2024