

Application #

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

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 for Residential Building and Trades Permit**

Owner's Name: <u>Ian and Jennifer Keller</u>	Date <u>09/16/24</u>		
Site Address:8618 NC 27 Coats, NC 27521	Phone <u>919–522–2017</u>		
Subdivision: N/A	Lot _1		
Description of Proposed Work: <u>Single Family New Construction</u> Total Job Cost <u>220,000</u>			
General Contractor Information			
S&S Constructors, LLC DBA S&S Homes Building Contractor's Company Name	919-738-2921 Telephone		
465 Perkins Road, Goldsboro NC 27530 Address	<u>ronsasser78@aol.com</u> Email Address		
82259 HEATED SQ FT 1769 GARAGE SC License #			
Description of Work New Construction Service Size:	<u>n</u> 200 Amps T-Pole: <sup>X</sup> Yes No		
Amped Electric Electrical Contractor's Company Name	919-625-0180 Telephone		
510 Denning Road, Benson NC 27594 Address	ampedelectricnc@yahoo.com Email Address		
30129-1 License #  Mechanical/HVAC Contractor Inform	ation		
Description of Work New Construction			
My HVAC Guys Mechanical Contractor's Company Name	919-796-8129 Telephone		
304 Stotts Mill Road, Wendell NC 27591 Address	<u>brandon.baker@myhvacguysnc.</u> com Email Address		
L.34239			
License #  Plumbing Contractor Informatio	n		
Description of Work New Construction	 _# Baths <u>2</u>		
NJ Plumbing Plumbing Contractor's Company Name	919-422-7715 Telephone		
1809 Bizzell Grove Church Rd, Selma NC 27576 Address	<u>lawrencegrady67@gmail.com</u> Email Address		
19805 License #			
License #  Insulation Contractor Information	<u>n</u>		
<u>Tri-City Insulation</u> Insulation Contractor's Company Name & Address	252-243-4999 Telephone		

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.



**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

09/16/2024

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14						
The undersigned applicant being the:						
X	General Contractor	Owner	Officer/Agent of the Co	ontractor 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.						
$\frac{X}{\text{them.}}$	Has one (1) or more subcontr	actors(s) and has c	obtained workers' comper	nsation insurance to cover		
X 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:09/16/2024		