



Application # BRES2311-0005
6018 NC 27E

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
Email centralpermitting@harnett.org

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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: Jan Keller Date 05/15/24
Site Address: 8618 NC 27E, Coats NC 27521 Phone 919 522-2017
Subdivision: _____ Lot _____
Description of Proposed Work: Residential Construction Total Job Cost _____

General Contractor Information

Jan Keller 919 522 2017
Building Contractor's Company Name Telephone
916 Robert Branch circle Fuquay Varina NC 27326 Keller.Jan.34@gmail.com
Address Email Address

HEATED SQ FT 2396.44 GARAGE SQ FT _____

License # _____

Electrical Contractor Information

Description of Work Initial Electrical Install Service Size: 200 Amps T-Pole: Yes No
Swatt Electric 910 890 7746
Electrical Contractor's Company Name Telephone
206 W E St, Erwin NC 28339 thomaswest41@gmail.com
Address Email Address
L36 336
License # _____

Mechanical/HVAC Contractor Information

Description of Work HVAC Installation
Triangle Repair Group 919-883-9277
Mechanical Contractor's Company Name Telephone
704 Three Sisters Rd Knightdale NC 27545 trianglerepairgroup@gmail.com
Address Email Address
33330
License # _____

Plumbing Contractor Information

Description of Work Under-slab plumbing (Rough in) # Baths 2
GW Plumbing Services L.L.C. 919 353 3586
Plumbing Contractor's Company Name Telephone
1049 Cool Spring Rd Lillington NC 27546 Service@gwplumbing.com
Address Email Address
35745
License # _____

Insulation Contractor Information

Energy Saving Insulation L.L.C. 919-798-9906
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.

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

05/15/24
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: Keller Date: 05/15/24