



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: Sandy Johnson Date 12/19/23

Site Address: 50 Alban Row Phone 919.392.1726

Subdivision: _____ Lot _____

Description of Proposed Work: Fire Damage Repair - Finish Total Job Cost 250,000

General Contractor Information

Provision Building Co
Building Contractor's Company Name

919.625.3751
Telephone

PO Box 10092, Raleigh, NC 27605
Address

chad@provisionbuildingco.com
Email Address

81323
License #

HEATED SQ FT 1325 **GARAGE SQ FT** _____

Electrical Contractor Information

Description of Work Repair fire damage and rough Service Size: 200 Amps T-Pole: Yes No

Sinewave Electric Triple Crown Electric, LLC
Electrical Contractor's Company Name

(919) 500-9000 919 414 628
Telephone

5513 Bellcamp Ct. 313-C US HWY 70E.
Address

guilder@sinewaveelectric.com
Email Address

32809 32141
License #

triplecrounelectric.com

Mechanical/HVAC Contractor Information

Description of Work Add addition unit in attic for new square foot

A. Mayner Heating & Air
Mechanical Contractor's Company Name

(919) 361.0993
Telephone

1000 Goodworth Dr. Apex, NC 27539
Address

mike.delaney@maynerservices.com
Email Address

35159
License #

Plumbing Contractor Information

Description of Work add new bath to attic # Baths 1

Coleys Quality Services
Plumbing Contractor's Company Name

(919) 938.1813
Telephone

6366B Old Roberts Rd., Benson, NC 27504
Address

schedule@coleys.com
Email Address

32853
License #

Insulation Contractor Information

LiveGreen 500 Old Pade Rd, Raleigh, NC 27610
Insulation Contractor's Company Name & Address Telephone (919) 453-6411

***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.

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

12/19/23
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: Chadley owner

Date: 12/19/23