



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: DEBRA & DONNIE GREGORY Date 3-15-2024
Site Address: 700 NC 82 DUNN, NC 28334 Phone 919-796-3456
Subdivision: _____ Lot _____
Description of Proposed Work: IN-LAW SUITE Total Job Cost 125K

General Contractor Information

DEBRA & DONNIE GREGORY 919-796-3456
Building Contractor's Company Name Telephone
Address DONNIE.W.GREGORY@GMAIL.COM
Email Address DEBRA.C.GREGORY@GMAIL.COM
License # HEATED SQ FT GARAGE SQ FT

Electrical Contractor Information

Description of Work LIGHTING & OUTLETS Service Size: 200 Amps T-Pole: Yes No
L & M ELECTRIC, INC 919-772-3356
Electrical Contractor's Company Name Telephone
Address 13679 CLEVELAND RD GARNER, NC 27529 BARRYLANDM@GMAIL.COM
Email Address 5830-4
License #

Mechanical/HVAC Contractor Information

Description of Work DUCT WORK FROM EXISTING UNIT
HEAT TRANSFER SOLUTIONS, INC 919-983-0144
Mechanical Contractor's Company Name Telephone
Address 632 OLD ROBERTS RD BENSON, NC 27504 JOHNJOHNSON@HTSNC.COM
Email Address 36093
License #

Plumbing Contractor Information

Description of Work PLUMB FOR BATHROOM # Baths 1
DEBRA & DONNIE GREGORY 919-796-3456
Plumbing Contractor's Company Name Telephone
Address DONNIE.W.GREGORY@GMAIL.COM
Email Address DEBRA.C.GREGORY@GMAIL.COM
License #

Insulation Contractor Information

TOP ARMOUR CONTRACTING LLC 680 WISERD 910-500-2562
Insulation Contractor's Company Name & Address DUNN, NC 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.

Donnie W Gregory Debra C Gregory
Signature of Owner/Contractor/Officer(s) of Corporation

3-11-2024
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:

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: Donnie W Gregory Debra C Gregory OWNERS Date: 3-11-24