



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: Pfumojena and Nicole Mushonga Date 3/14/2024
Site Address: 3610 Kipling Rd, Fuquay Varina 27625 Phone 317-413-8561
Subdivision: _____ Lot _____
Description of Proposed Work: Residential inground pool Total Job Cost 128400

General Contractor Information

Anthony & Sylvan Pools 919-886-0679
Building Contractor's Company Name Telephone
2101 Westinghouse Blvd, Raleigh, NC 27604 kt.poolpermits@gmail.com
Address Email Address
68766 **HEATED SQ FT** **GARAGE SQ FT**
License # _____

Electrical Contractor Information

Description of Work Electrical for inground pool Service Size: NA Amps T-Pole: Yes No
Carrington Electric LLC 919-390-5304
Electrical Contractor's Company Name Telephone
2330 New Bern Ave, Raleigh, NC 27610 Adam@CarringtonElectricLLC.com
Address Email Address
L.26305
License # _____

Mechanical/HVAC Contractor Information

Description of Work heat for pool
Apostle Service Group, LLC 9196706685
Mechanical Contractor's Company Name Telephone
50 Cole Creek way, Franklinton, NC 27525 gasmastersnc@gmail.com
Address Email Address
35291
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name Telephone _____
Address Email Address _____
License # _____

Insulation Contractor Information

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.

DocuSigned by:

Ashley Gammon

3/14/2024

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

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.

DocuSigned by:

Ashley Gammon

Date: 3/14/2024

Sign w/Title: _____

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