

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:Porter Built Homes	Date 4/10/2024
Site Address: 285 Deer Tail Ln. Fuquay Varina, NC 27526	Phone 919-390-9117
Subdivision: Cotton Farms	 Lot43
Description of Proposed Work: Finish Attic Space	Total Job Cost\$34,000
General Contractor Information	
Porter Built Homes, LLC	919-390-9117
Building Contractor's Company Name	Telephone
2664 Timber Dr. Suite 115	chris@porterbuiltnc.com
Address	Email Address
88578 HEATED SQ FT 720 GARAGE S	Q FT
License #	
Electrical Contractor Informatic Description of Work New Residential Install Service Size:	<u>200_</u> Amps_T-Pole: <u>X_</u> YesNo
Dawson's Electric, Inc.	919-552-0246
Electrical Contractor's Company Name	Telephone
280 Jarco Rd. Fuquay Varina, NC 27526	nikki@dawsonselectric.com
Address	Email Address
25948	
License #	
Mechanical/HVAC Contractor Inform	nation
	nation
Mechanical/HVAC Contractor Inform	<u>nation</u>
Mechanical/HVAC Contractor Inform	
Mechanical/HVAC Contractor Inform Description of Work New Residential Install Stephenson Heating and Air Conditioning, Inc. / Charles Anthony Stephenson	919-329-0686 Telephone stephensonhvac@aol.com
<u>Mechanical/HVAC Contractor Inform</u> Description of Work <u>New Residential Install</u> <u>Stephenson Heating and Air Conditioning, Inc. / Charles Anthony Stephenson</u> Mechanical Contractor's Company Name	<u>919-329-0686</u> Telephone
Mechanical/HVAC Contractor Inform Description of Work New Residential Install Stephenson Heating and Air Conditioning, Inc. / Charles Anthony Stephenson Mechanical Contractor's Company Name 343 Shipwash Dr. Garner, NC 27529 Address 18644	919-329-0686 Telephone stephensonhvac@aol.com
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*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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

outer - Owner

4/10/2024

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:
X 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.
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: