

Application #

Harnett County Central Permitting

420 McKinney Pkwy / PO Box 65 Lillington, NC 27546 – centralpermitting@harnett.org

Ph.: 910-893-7525 - Fax: 910-893-2793 / www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: Ramos Juliet Maria - Ramos Lazaro Phone: 954 907 9902

Owner (s) Mailing Address: 835 Coachman Way
Sanford, NC 27332

Land Owner Name (s): Ramos Juliet Maria - Ramos Lazaro Phone: _____

Construction or Site Address: 835 Coachman Way Sanford, NC 27332

PIN # 9585-55-1658.000 Parcel # 03958519 0064

Job Cost (Required): \$29,400 Description of Work to be done: convert existing covered 7x12 and 9x12 porches into 3 season spaces
convert existing 9x12 deck into a 3 season space / Build new 12x18 deck with steps

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp ___ <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ☒ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:

Take highway 27 to Buffalo Lake Road
Turn into Carolina Lakes

Subdivision: Carolina Lakes Lot #: 64

I Michael B Whiting will provide the Carpentry labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is NA, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

DGC Home Solutions
Contractor's Company Name

835 Coachman Way Sanford, NC 27332
Address

919 215 5927
Telephone
dgc.h@yahoo.com
Email Address

License #

Structure Owner / Contractor Signature: Michael B Whiting Date: 5 May 2025

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work

***Company name, address, & phone must match information on license**

Faxed or Mailed application could have an approximately 1-5 day process time



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.

Michael B. Whiting
Signature of Owner/Contractor/Officer(s) of Corporation

5 May 2025
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: Michael B. Whiting CONTRACTOR Date: 5 MAY 2025