



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: Susan Hall Date 7/18/21  
Site Address: 357 Bogie Landing Dr Phone 910 891 9542  
Subdivision: 365 Lot 5  
Description of Proposed Work: Final finishes to obtain C/O Total Job Cost 10,000

**General Contractor Information**

Prime Estate Renovation 623-297-5810  
Building Contractor's Company Name Telephone  
1627 Stonegate N Sanford NC 27332 primeestaterenovations@gmail.com  
Address Email Address  
82360 **HEATED SQ FT** 1568 **GARAGE SQ FT** n/a  
License #

**Electrical Contractor Information**

Description of Work Install switches, outlets + breakers Service Size:          Amps T-Pole:          Yes          No  
VRG Electric 919 356 2225  
Electrical Contractor's Company Name Telephone  
6401 Reeves Dr Sanford NC 27332 vancegust@icloud.com  
Address Email Address  
1.32452  
License #

**Mechanical/HVAC Contractor Information**

Description of Work Install unit  
Sure Temp Mechanical 919-777-0668  
Mechanical Contractor's Company Name Telephone  
3105 Hal Siler Rd Sanford NC 27332  
Address Email Address  
19738  
License #

**Plumbing Contractor Information**

Description of Work make final connections # Baths 2 1/2  
HR Curtis Plumbing 919-770-0168  
Plumbing Contractor's Company Name Telephone  
6314 Carbantun Rd Sanford NC 27330 hrcurtisplumbing.com  
Address Email Address  
10924  
License #


**Insulation Contractor Information**

Larry Hall Insulation 567 Fall Creek Dr 910 464 3540  
Insulation Contractor's Company Name & Address Bennett 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.**

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

7/18/21  
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:  Vice President    Date: 7/18/21