

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address company name & phone must match.

Application for Residential Building and Trades Permit

Owner's Name Murray Cozart Date 4/16/2018
Site Address 9651 Hwy 42, Holly Springs NC 27560 Phone 919-552-1183
Directions to job site from Lillington Hwy 401 N to Piney Grove Wilbon then left onto Hwy 42 then 4.3 miles to House on Right

Subdivision NA Lot # 1A
Description of Proposed Work New Single Family Home # of Bedrooms 2
Heated SF 1127 Unheated SF _____ Finished Bonus Room? N/A Crawl Space Yes Slab _____

General Contractor Information

Triangle Home Pros LLC 919-346-1528
Building Contractor's Company Name Telephone
6312 Lauraca LN, Fuquay Varina, NC 27526 THH Homes@gmail.com
Address Email Address
77019
License #

Electrical Contractor Information

Description of Work Place Electrical new SFH Service Size 200 Amps T-Pole Yes No
Dawsons Electric Inc 919-552-0246
Electrical Contractor's Company Name Telephone
609 Cotton R. d, Fuquay Varina NC 27526 Travis@DawsonsElectric.com
Address Email Address
25948-L
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC New SFH
J.C.'s Heating & Air 919-552-3053
Mechanical Contractor's Company Name Telephone
1539 Wade Stephenson, Holly Springs, NC 27540 JCSHVAC@gmail.com
Address Email Address
H3-12655
License #

Plumbing Contractor Information

Description of Work Plumb New SFH # Baths 2
All-Max Plumbing 919-698-0111
Plumbing Contractor's Company Name Telephone
2428 Reliance Ave, Apex NC 27539 Vicky@All-MaxPlumbing.com
Address Email Address
29022
License #

Insulation Contractor Information

Stephens Building Products 919-937-8479
Insulation Contractor's Company Name & Address Telephone
1220 Corporation Pkwy, Raleigh NC

*NOTE General Contractor 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


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

4/16/2018
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

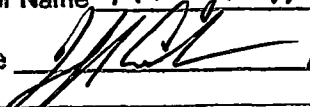
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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

Company or Name Triangle Home Pros LLC

Sign w/Title  President Date 4/16/2018