

Application # _____

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Ashley K Webb		Date: 1/31/2023
Site Address: 276 Maple Rd	Phone:	910-322-8252
Subdivision:	Lot:	
Description of Proposed Work:Master Bedroom and Bath Expansion, Bonus Expa	nsio li otal Job Cost :	56000
General Contractor Informatio	n	
Ridgeline Home Builder Inc	9194226948	
Building Contractor's Company Name	Telephone	_
3448 Barn Rd, Apex NC, 27502	ameza@ridgelinenc.com	
Address	Email Address	
85811 HEATED SQ FT 2087 GARAGE S	Q FT 420	
License #		
Electrical Contractor Information		Polo: Voc X No.
Description of Work Move Electrical at Expansion Service Size: 1st Step Electrical	9192011950	rolefes _^_INO
Electrical Contractor's Company Name		
PO Box 52334 Durham NC, 27717	Telephone	ool@amoil.com
Address	Email Address	al@gmail.com
20647	Email Address	
License #		
Mechanical/HVAC Contractor Inform	nation	
Description of Work Extend supply lines into expansion		
Delta T Services Inc	9194461644	-
Mechanical Contractor's Company Name	Telephone	-
410 Kinsey St, Raleigh NC, 27603	keith@DeltaTN	IC.com
Address	Email Address	
34029		
License #		
Plumbing Contractor Information	<u>on</u>	
Description of Work Relocate Plumbing Fixtures at Master Bath	# Baths1	
MBS Plumbing Service	9193242979	
Plumbing Contractor's Company Name	Telephone	
202 Hickory Meadow Cir, Morrisville NC, 27560	mbsplumbings	service@gmail.com
Address	Email Address	
33428		
License #		
Insulation Contractor Information	<u></u>	
Twins Gun Insulation	9192644044	
Insulation Contractor's Company Name & Address	Telephone	

*NOTE: General Contractor / owner must fill out and sign the second page of this application.



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.

Ridgeline Home Builder Inc		1/31/2023		
Signature of Owner/Contractor/Of	ficer(s) of Corpora	ation Date		
A ffi do vit	for Morkovic	Composition N.C.C.C. 07.44		
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.				
x 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.				
Department issuing the permit ma	y require certificat	sought it is understood that the Central Permitting tes of coverage of worker's compensation insurance prior permitted work from any person, firm or corporation		
Sign w/Title: Ridgeline Home Bu	uilder Inc	Date: 1/31/2023		