

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application #

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

Application for Building and Trades Permit

Owner's Name: Penny Road Developers, LLC	Date: 03/15/2021
	Phone: See GC phone#
Description of Proposed Work: Electrical and Irrigation	
General Contractor Information: Building Cost \$_	
New Home Inc., LLC	919-446-6865
Building Contractor's Company Name	Telephone
1092 Classic Road Apex, NC 27539	jennifer.erwin@reliabuilt.biz
Address	Email Address
	82896
Signature of Owner/Contractor/Officer(s) of Corporation Electrical Contractor Information: Electrical Cost \$	License #
Electrical Contractor Information: Electrical Cost \$ Description of Work Service Size:	Amps #T-Poles
Electrical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation Mechanical Contractor Information: Mechanical Cost	License # st \$ 500.00
	# Units
Mechanical Contractor's Company Name	Telephone
Address	Email Address 3985
Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost \$ 5	License #
Description of Work Test RPZ	# Baths 0
,	919-761-3766
Plumbing Contractor's Company Name	Telephone
Hebert Plumbing	
Address // /////	Email Address
facll Colcoell	#14961
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	Telephone

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



	Sprinkler Contractor Inform	nation
Montague Building Co		919-362-7477
Sprinkler Contractor's Con		Telephone
10305 Penny Road Raleig	gh NC 27606	
Address		Email Address
01		3985
Signature of Officer(s) of C	Corporation Fire Alarm Contractor Inform	License #
	THE FRANK CONTROL OF THE OTHER	THE CONTRACT OF THE CONTRACT O
Fire Alarm Contractor's Co	ompany Name	Telephone
Address		Email Address
Signature of Officer(s) of C	Corporation	License #
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit? Yes No		
number of bedrooms, build changes, I certify it is my any and all changes. Expired Permit Fees - 6 r is charged at full price per	nown to me and if <u>any</u> changes occur inding and trade plans, Environmental Heal responsibility to notify the Harnett Count months to 2 years permit re-issue fee is current fee schedule. actor/Officer(s) of Corporation	th permit changes or proposed use y Central Permitting Department of
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
General Contracto		ent of the Contractor or Owner
Do hereby confirm under p set forth in the permit:	enalties of perjury that the person(s), firm	n(s) or corporation(s) performing the work
Has three (3) or mo	re employees and has obtained workers'	compensation insurance to cover them.
them. Has one (1) or more	e subcontractors(s) and has obtained wor	kers' compensation insurance to cover
Has one (1) or more covering themselves.	e subcontractors(s) who has their own po	licy of workers' compensation insurance
Has no more than to	wo (2) employees and no subcontractors.	
Department issuing the per	ct for which this permit is sought it is under rmit may require certificates of coverage and at any time during the permitted work	of worker's compensation insurance prior
Sign w/Title:		Date: