



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: Daryl Buckland Date 4/14/2023

Site Address: 2789 McLean Chapel Church Rd. Bunnlevel, NC 28323 United States Phone (919)943-3476

Subdivision: _____ Lot _____

Description of Proposed Work: Replacing load bearing post with new proposed LVL for opening in between kitchen and dining space per engineer plan + Interior remodel. Total Job Cost \$65,000

General Contractor Information

Montano Construction LLC (919)923-0103

Building Contractor's Company Name Telephone

520 Locust Rd. Hillsborough, NC 27278 United States montanoconstructionnc@gmail.com

Address Email Address

87905 HEATED SQ FT 1503 GARAGE SQ FT _____

License # _____

Electrical Contractor Information

Description of Work Whole house rewire Service Size: 200 Amps T-Pole: Yes No

Jared's Electrical Services (910)818-7800

Electrical Contractor's Company Name Telephone

111 Killington Pl Dunn, NC 28334 United States jared.barina@gmail.com

Address Email Address

33975

License # _____

Mechanical/HVAC Contractor Information

Description of Work 2.5 ton split HP with all new ductwork, supply, return, dryer and bath vents

Comfort Shield (919)588-8015

Mechanical Contractor's Company Name Telephone

937 N Brightleaf Blvd., Suite A, Smithfield, NC 27577 United States courtney@comfortshieldhvafnc.com

Address Email Address

32187

License # _____

Plumbing Contractor Information

Description of Work Running new drainage for kitchen, and bathrooms. New supply lines for washer, water heater, and kitchen # Baths 2

Comfort Shield (919)588-8015

Plumbing Contractor's Company Name Telephone

937 N Brightleaf Blvd., Suite A, Smithfield, NC 27577 United States courtney@comfortshieldhvafnc.com

Address Email Address

13236

License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address 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.

EMC

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

4/14/2023

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:

EMC

Date: 4/14/2023