

Application #

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

## Application for Residential Building and Trades Permit

Owner's Name: Darrius L. Perry	Date: 3/26/2021
Site Address: 221 Willowcroft Drive	Phone: 919-244-1688
Subdivision: Leigh Laurel	Lot: <u>23</u>
Description of Proposed Work: One new construction single-family hor	me Total Job Cost: 275,000
General Contractor Information	<u>on</u>
J&R Homes LLC	919-897-5643
Building Contractor's Company Name	Telephone
2725 Jefferson Davis Highway, Sanford, NC 27332	Allison@JRHomes.us
Address	Email Address
84436 HEATED SQ FT 3415 GARAGE S	SQ FT 773
License #	
Electrical Contractor Information	
	: 200 Amps T-Pole: X Yes No
Buford Electric	910-491-5490
Electrical Contractor's Company Name	Telephone
2978 Gillespie Street, Fayetteville, NC 28306	buford.warranty@gmail.com
Address	Email Address
31424	
License #	
Mechanical/HVAC Contractor Infor	<u>mation</u>
Description of Work Install new mechanical/ HVAC in home	
Carolina Comfort Air, Inc.	910-338-3670
Mechanical Contractor's Company Name	Telephone
703 N Clinton Avenue, Dunn, NC 28334	rebecca@carolinacomfortair.com
Address	Email Address
29077	
License #	
Plumbing Contractor Informati	ion
Description of Work Install new plumbing in home	# Baths_4
Titans Plumbing	919-615-1947
Plumbing Contractor's Company Name	Telephone
PO Box 1045, Dunn, NC 28335	business@titansplumbing.com
Address	Email Address
34800	
License #	
Insulation Contractor Informati	<u>ion</u>
Tri City Insulation and Building. 334 E. Mountain Drive, Fayetteville, NC 28306	910-486-8855
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.

<b>EXPIRED PERMIT FEES</b> - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per <u>current</u> fee schedule.		
is as per current rec sorredule.	3/26/2021	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14		
The undersigned applicant being the:		
X General Contractor Owner Office	er/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.		
$\overline{\text{them.}}$ Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.		
$\frac{\times}{\text{covering themselves}}$ 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 Department issuing the permit may require certificates of cove to issuance of the permit and at any time during the permitted carrying out the work.	rage of worker's compensation insurance prior	
Sign w/Title:	Date: 3/26/2021	