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

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 McKee Homes, LLC	Date 10/24/18
Site Address 43 Hopeland Drive	Phone 910-475-7100
Directions to job site from Lillington 127 to Docs Road, develop	pment on the left
Subdivision Oakmont Valley View	Lot 199
Description of Proposed Work Single Family Home	# of Bedrooms 4
Heated SF 2225 Unheated SF 706 Finished Bonus R	Room? No Crawl Space Slab X
General Contractor Inf	
GML Development, Inc	910-475-7100,727
Building Contractor's Company Name	Telephone
109 Hay Street, Ste 301, Fayetteville, NC 28301	krivera@mckeehomesnc.com
Address	Email Address
63970	
License #	
Electrical Contractor In	formation
	ice Size 200 Amps T-Pole Yes N
J.M. Pope Electric	919-776-5144
Electrical Contractor's Company Name	Telephone
409 Chatham St., Sanford, NC 27330	jmpopeelectric@gmail.com
Address	Email Address
04000 I	
21326-L	
License #	
	or Information
License # Mechanical/HVAC Contractor	or Information
Mechanical/HVAC Contractor Description of Work Single Family Homes	or Information 910-858-0000
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air	
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name	910-858-0000
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor s Company Name P.O. Box 1071, Hope Mills, NC 28348	910-858-0000 Telephone
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address	910-858-0000 Telephone certifiedheatair@embarqmail.com
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1	910-858-0000 Telephone certifiedheatair@embarqmail.com
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor s Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in Description of Work Single Family Home	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address Iformation # Baths 2.5
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in Description of Work Single Family Home Dell Haire Pluming	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address formation # Baths 2.5 910-818-4863
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in Description of Work Single Family Home Dell Haire Pluming Plumbing Contractor's Company Name	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address # Baths 2.5 910-818-4863 Telephone
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor s Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor In Description of Work Single Family Home Dell Haire Pluming Plumbing Contractor s Company Name 7612 Documentary Drive, Fayetteville, NC 28306	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address Iformation # Baths 2.5 910-818-4863 Telephone dellhaireplumbing@hotmail.com
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in Description of Work Single Family Home Dell Haire Pluming Plumbing Contractor's Company Name 7612 Documentary Drive, Fayetteville, NC 28306 Address	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address # Baths 2.5 910-818-4863 Telephone
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor's Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in Description of Work Single Family Home Dell Haire Pluming Plumbing Contractor's Company Name 7612 Documentary Drive, Fayetteville, NC 28306 Address 32886 P1	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address Iformation # Baths 2.5 910-818-4863 Telephone dellhaireplumbing@hotmail.com
Mechanical/HVAC Contractor Description of Work Single Family Homes Certified Heating & Air Mechanical Contractor s Company Name P.O. Box 1071, Hope Mills, NC 28348 Address 20012- H3-1 License # Plumbing Contractor in Description of Work Single Family Home Dell Haire Pluming Plumbing Contractor s Company Name 7612 Documentary Drive, Fayetteville, NC 28306 Address 32886 P1 License #	910-858-0000 Telephone certifiedheatair@embarqmail.com Email Address # Baths 2.5 910-818-4863 Telephone dellhaireplumbing@hotmail.com Email Address
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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.

Kelsey Rivera Date: 2018.10.24 14:59:42 Date: 2018.10.24 14:59:42	10/24/18
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compe	nsation N C G S 87-14
X General Contractor Owner Of	ficer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the persor set forth in the permit	n(s) firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained w	vorkers compensation insurance to cover them
Has one (1) or more subcontractors(s) and has obtain them	ned workers compensation insurance to cover
Has one (1) or more subcontractors(s) who has their covering themselves	own policy of workers compensation insurance
Has no more than two (2) employees and no subcont	tractors
While working on the project for which this permit is sought a Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitte carrying out the work	verage of worker's compensation insurance prio
Company or Name McKee Homes, LLC	

Sign w/Title Kelsey Rivera Digitally signed by Kelsey Rivera Delte: 2018.10.24 14:59:56-0400 Preconstruction Coordinate 10/24/18