



Application # 5FD1903-0041

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

Application for Residential Building and Trades Permit

Owner's Name: BRYAN & JORDAN MALONEY Date: 4/25/19
Site Address: 370 CYPRESS CHURCH RD, CAMEKON, NC 28326 Phone: 910-987-0370
Subdivision: N/A Lot: 9554-61-3433.000
Description of Proposed Work: Construction of Single Family Home

General Contractor Information

TRIFECTA GROUP LLC 910-944-0881
Building Contractor's Company Name Telephone
2075 JUNIPER LAKE RD, WEST END, NC 27376 bruce@trifectadevbuild.com
Address Email Address
77655
License #

Electrical Contractor Information

Description of Work All electrical Service Size: 200 Amps T-Pole: Yes No
POPE'S ELECTRIC SERVICE, INC. 910-944-1996
Electrical Contractor's Company Name Telephone
2800 N.C. HWY #5, PINETHURST, NC 28374 manager@popeselectric.com
Address Email Address
4537 U
License #

Mechanical/HVAC Contractor Information

Description of Work All HVAC
4 SEASONS HEATING & AIR, INC. 910-235-0606
Mechanical Contractor's Company Name Telephone
132 WESTGATE DR, WESTEND, NC 27376 vadams4seasons@gmail.com
Address Email Address
20507
License #

Plumbing Contractor Information

Description of Work All plumbing # Baths 4
Greene's Plumbing, Inc. 910-974-4035
Plumbing Contractor's Company Name Telephone
980 NC HWY 731 E, CANDOR, NC 27229 No Email
Address Email Address
13979
License #

Insulation Contractor Information

INSULATING INC, 1827 JEFFERSON-DAVIS HWY, SANFORD, NC 27330 919-776-4138
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.


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

25 Apr 19
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

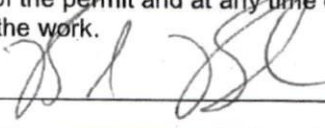
The undersigned applicant being the:

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:  Managing Member Date: 25 Apr 19