



Application # _____

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

Application for Residential Building and Trades Permit

Owner's Name: Ray Halford Womble III Date: 12/01/2020
Site Address: 8000 Christian Light Rd., Fuquay-Varina, NC 27526 Phone: (919) 389-6110
Subdivision: n/a Lot: n/a
Description of Proposed Work: New Home Construction Total Job Cost: \$465,000

General Contractor Information

Keith Bullock Builders, Inc. (919) 427-4628
Building Contractor's Company Name Telephone
72 Overlook Ct., Angier, NC 27501 kbbinc14@gmail.com
Address Email Address
47504 HEATED SQ FT 3290 GARAGE SQ FT n/a
License #

Electrical Contractor Information

Description of Work New Construction housework Service Size: 400 Amps T-Pole: Yes No
Harmon's Electric + Home Improvements, Inc (919) 353-8982
Electrical Contractor's Company Name Telephone
800 Vernon St., Broadway, NC 27505 harmonshomeimprovement
Address Email Address @yaho.com
u32567
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction HVAC work
J+M Heating + A/C, Inc. (910) 897-5501
Mechanical Contractor's Company Name Telephone
724 Turlington Rd., Dunn, NC 28334 jandmhvac@centurylink.net
Address Email Address
17164
License #

Plumbing Contractor Information

Description of Work New Construction # Baths 3.5
John Wells (919) 628-6130
Plumbing Contractor's Company Name Telephone
PO Box 174, Angier, NC 27501 gmacookie@embarqmail.com
Address Email Address
23979
License #

Insulation Contractor Information

Insulating, Inc. 5902 Fayetteville Rd. Raleigh (919) 256-9600
Insulation Contractor's Company Name & Address NC 27603 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.

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

12/01/2020
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: , Owner Date: 12/01/2020