



Application # SFD1910-0034

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: David & Patty Sexton Date: 1-13-20
Site Address: 6966 421 S. Erwin NC Phone: 910-893-8590
Subdivision: None Lot: _____
Description of Proposed Work: Build house SFD Total Job Cost: \$150,000

General Contractor Information

Champion Custom Homes Telephone: 910-304-7390
Building Contractor's Company Name
Old Creedman Rd Raleigh Email Address: ChampionCustomHomes@gmail.com
Address: 76364
License #: _____

Electrical Contractor Information

NEIL Description of Work: _____ Service Size: _____ Amps T-Pole: Yes No
Thomas Pioneer Electric Telephone: 919 499 7767
Electrical Contractor's Company Name
80 NEIL Thomas Rd Lillington Email Address: _____
Address: 21643-4
License #: _____

Mechanical/HVAC Contractor Information

Description of Work: HVAC
Randy LEE Jackson Telephone: 910 242 2941
Mechanical Contractor's Company Name
100 N. 13th St Suite 15W Erwin NC 28339 Email Address: _____
Address: 18512
License #: _____

Plumbing Contractor Information

Description of Work: Plumbing # Baths: _____
Halls Plumbing Service Telephone: 910 897-5220
Plumbing Contractor's Company Name
Address: _____ Email Address: _____
20907
License #: _____


Insulation Contractor Information

Robbie Jones Telephone: 919-628-9783
Insulation Contractor's Company Name & Address: Raleigh NC

***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 Date: 1-13-20
 (Homeowner)
 For Champion

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: David Taylor for CC#12 Date: 1-13-20

(Homeowner)
See Build APP #2 Gen. Contractor