Application #5F0[911-0037

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

Application for Residential Building and Trades Permit

Owner's Name: LCT Homes - NC, LLC	Date: 11 18 19
Site Address: 63 Old Hood Way	Di 910 000 000
Directions to job site from Lillington: Hwy 401N From Li	11. 1 . 1
Left on Chalybeate Rd for 18 mile, Ava	ery fond on Left
Subdivision: Array Pond	Lot: 81
Description of Proposed Work: New Construction - 5	FD # of Bedrooms: 3
Heated SF: 1800 Unheated SF: Finished Bonus Room General Contractor Informa	? No bow a Crawl Space: Slab:
LGL Homes-NC LLC	919-795-3922
Building Contractor's Company Name	Telephone
Address The Woodlands, TX	Keith. Sears a LGThomes. com Email Address
74803 (TE DOODHOURS, [K	
License # 7738(
Description of Work New Construction Service Si CMC Flectric Electrical Contractor's Company Name DLE N. LOM Own St. SLite IDA Address Clayton NC 27520 License #	ation ze: 200 Amps T-Pole: Yes_No
Mechanical/HVAC Contractor Info	ormation
Description of Work New Construction	STITUTE
Mechanicale Mechanical Contractor's Company Name	704-882-4522
Mechanical Contractor's Company Name	Telephone
Address License # Douglas Bivens	mwalkeracary/mechanicals.com Email Address
Dismission O. C. C. C.	ition
Description of Work New Construction Indicate Company Name Plumbing Contractor's Company Name 3 LOA VINSON Ra Clayton NC 2752 Address 23 152 License #	#Baths 2 1/2 919-550-4333 Telephone Email Address
Insulation Contractor Informa	
Tatum Insulation/ Insulation Contractor's Company Name & Address	919-661-0999 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	111819 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.		
Company or Name: LGI Homes - NC, LLC.		
Sign W/Title: Knith - Regional Construction Manager Date: 11 18 19		