

Application # <u>SFD 2001: 006</u> 2

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

tion on license.	. 1 1
Owner's Name: Penny Road developers Site Address:	Date: \\\7\20
Site Address:	Phone: 919-362-7336
Subdivision: QUAIL GLEN	Lot: 57
Description of Proposed Work: New SF Home	
General Contractor Information	
NURINC. dea Ryan Homes	703-713-2660
Building Contractor's Company Name	Telephone
5734 Trinity Rd. Suite 200 Raleigh NC	Nchamana NURING. COM
Address 21667	Email Address
42783 License #	
Description of Work All electrical Contractor Informatio Service Size:	<u>n</u>
Description of Work All electrical Service Size:	Myes LNo
Absolute Power	919-995-61136
Electrical Contractor's Company Name	Telephone
S448 Apex Peakuag #301, Apex NC 27502 Address	Mhowington@absolute powercompany Email Address
10980-U	Email Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work AII HVAC	
Doian Design	919-896-8630
Mechanical Contractor's Company Name	Telephone
3209 Wellington Ct. #107 Raleigh NC	Larraga dolan design hvac.com
Address 97615	Email Address
20026 License #	
Plumbing Contractor Informatio	n
Description of Work All Plumbing	# Baths 3
All American Plumbing Plumbing Contractor's Company Name	9 10-847-3001
	Telephone_
157 E. lemon St. Coats NC 27521	Javera@AADCOINC.net
Address	Email Address
D 11 T .	914-788-9806
Insulation Contractor's Company Name & Address Pale Table No.	Telephone
157 E. Lemon St. Coats NC 27521	Telephone Tavera@AAPCOINC.net Email Address 1 919-788-9806

*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.	
1/17/20	
Signature of Owner/Contractor/Officer(s) of Corporation Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14	
The undersigned applicant being the:	
The distribution 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.	
1/12/26	
Sign w/Title:	

Special Assignments Manager