

09/09/11

Application # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 85 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 McKee Homes, LLC Date 3/4/2020  
Site Address 128 School Side Drive Phone 9104757100,727  
Directions to job site from Lillington Nursery Road to entrance

Subdivision Anderson Creek - Academy Lot 1075  
Description of Proposed Work Single Family Home # of Bedrooms 4  
Heated SF 2309 Unheated SF 649 Finished Bonus Room?      Crawl Space x Slab     

**General Contractor Information**

McKee Homes, LLC  
Building Contractor's Company Name McKee Homes, LLC Telephone 910-475-7100,727  
109 Hay Street, Ste 301, Fayetteville, NC 28301 krivera@mckeehomesnc.com  
Address 82453 Email Address       
License #     

**Electrical Contractor Information**

Description of Work Single Family Home Service Size 200 Amps T-Pole  Yes  No  
J.M. Pope Electric Telephone 919-776-58144  
Electrical Contractor's Company Name J.M. Pope Electric  
409 Chatham Street, Sanford, NC 27330 jmpopeelectric@gmail.com  
Address 21326-L Email Address       
License #     

**Mechanical/HVAC Contractor Information**

Description of Work Single Family Home  
Certified Heating and Air Telephone 910-858-0000  
Mechanical Contractor's Company Name Certified Heating and Air  
P.O. Box 1071, Hope Mills, NC 28348 certified heatair@embarqmail.com  
Address 2012 H3-1 Email Address       
License #     

**Plumbing Contractor Information**

Description of Work Single Family Home # Baths       
Dell Haire Plumbing Telephone 910-818-4863  
Plumbing Contractor's Company Name Dell Haire Plumbing  
7612 Documentary Drive, Fayetteville, NC 28306 dellhaireplumbing@hotmail.com  
Address 32886 P1 Email Address       
License #     

**Insulation Contractor Information**

Cumberland Insulation Telephone 910-484-7118  
Insulation Contractor's Company Name & Address      Telephone     

\*NOTE General Contractor 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

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

3/4/2020  
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

Company or Name McKee Homes, LLC

Sign w/Title Kelsey Rivera Pre Construction Coordinator Date 3/4/2020