



Application # SFD 2004-0006

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: Graham & Ainsley Johnson Date: 4-21-2020

Site Address: 7568 Hawks Church Rd Fuquay Varina Phone: 919-524-2961

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Proposed Work: New Home Total Job Cost: 290,000

**General Contractor Information**

Moss Homebuilders & Realty Inc. Alan Moss - 910-890-2111  
Building Contractor's Company Name Telephone

P.O. Box 577 Lillington, NC  
Address Email Address

NCGL 58575  
License #

**Electrical Contractor Information**

Description of Work Residential Home Wiring Service Size: 200 Amps T-Pole:  Yes  No

Austin Dean Electrical Contractor 919-669-0063  
Electrical Contractor's Company Name Telephone

2837 Baptist Grove Rd Fuquay Varina NC austindeanelectrical@gmail.com  
Address Email Address

L-29837  
License #

**Mechanical/HVAC Contractor Information**

Description of Work HVAC 919-557-3454  
Bar-CC Heating & AC Barkley Arnold Telephone

122 Philemon Drive Fuquay Varina, NC  
Address Email Address

18460  
License #

**Plumbing Contractor Information**

Description of Work Plumbing # Baths 2.5  
Cains Plumbing 919-427-8026  
Plumbing Contractor's Company Name Telephone

544 Oakridge Duncan Ad Fuquay Varina, NC  
Address Email Address

10036  
License #

**Insulation Contractor Information**

Insulation INC 5902 Fayetteville Rd Raleigh 919-772-9000  
Insulation Contractor's Company Name & Address 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.

Braham Johnson  
Signature of Owner/Contractor/Officer(s) of Corporation

4-22-2020  
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: Braham Johnson Owner Date: 4-22-2020