



Application # _____

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: Gregory Inc Date: 6-5-2020
Site Address: ~~XXXXXXXXXX~~ 3602 NC 27E. Coats Phone: 919-422-8130
Subdivision: ~~XXXX (XXXX-XXXX-XXXX)~~ N/A Lot: 2
Description of Proposed Work: Build New Home Total Job Cost: 1137K

General Contractor Information

Gregory Inc
Building Contractor's Company Name
800-A N. Raleigh St Angier
Address
36220
License #

919-422-8130
Telephone
Gregoryindanman@gmail.com
Email Address

Electrical Contractor Information

Description of Work New Home
D2 Electric
Electrical Contractor's Company Name
100 Hidden Creek Ln, Lillington
Address
24311-L
License #

Service Size: 200 Amps T-Pole: Yes No
910-723-3242
Telephone
Email Address

Mechanical/HVAC Contractor Information

Description of Work New Home
Polar Bear Heating & Air
Mechanical Contractor's Company Name
P.O. Box 987 Coats, NC
Address
30048
License #

910-890-0953
Telephone
Email Address

Plumbing Contractor Information

Description of Work New Home
Barnes Plumbing
Plumbing Contractor's Company Name
239 Millwood Ln
Address
17735 class 1
License #

Baths 2
919-422-2133
Telephone
Email Address

Insulation Contractor Information

Insulating Inc
Insulation Contractor's Company Name & Address

919-772-9000
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

6-5-2020

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:

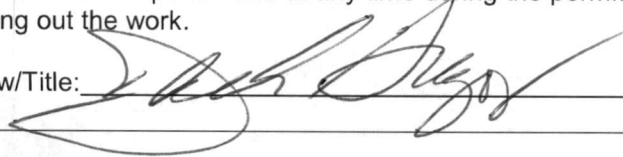
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  Vice-President Date: 6-5-2020