

Application # ____

* 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. Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

	1 1
Owner's Name: LGT Homes - NC, LLC	Date: 616 2000
Site Address: 30 Donn beg Drug	Phone: 919-795-3922
Subdivision: Avery Pana	Lot: 1 /2 A
Description of Proposed Work: New Construction - 8	POTotal Job Cost:
General Contractor Informati	on
Building Contractor's Company Name	919-796-3922 Telephone
Building Contractor's Company Name	Telephone
1450 Lake Robbins Drive ste 430 Address 74803 The Woodlands TX 77380	Keith Scarse Lgihomes com
74803 The Woodlands 1X 77380	Email Address
License #	
Description of Work Nous Contractor Information	777
Description of Work New Construction Service Size CMC Flectric Electrical Contractor Information Service Size Electrical Contractor's Company Name IDL N. Lomboard ST. Suite 10	Amps T-Pole: V Yes No
Electrical Contractor's Company Name 106 N. Lomboard St. State 101 Address Clayton NC 27520 U26804	Telephone
106 N. Lomboard St. Shite 101	construction ocmceleric. com
Address Clayton NC 27520	Email Address
License #	
Mechanical/HVAC Contractor Information	nation
Description of Work New Construction	
Can't Mechanical	704-882-4522 Telephone
Mechanical Contractor's Company Name	Talanta
10/4/17) GT 01/1-16: d = 0 1/10 M/10-100 0	relephone
5910 Stockbridge Only Monroe	mvalker complmechanicals. com
Address 16647 - Douglas Bivens	M Walker Coary mechanicals um Email Address
16647 - Douglas Bivens	Email Address
License # Plumbing Contractor Information	Email Address
License # Description of Work New Construction	Email Address
Description of Work New Construction Description of Work Plumbing Contractor Information	mwarer coary mechanicals for Email Address # Baths 2 / 2 919-550-4833
License # Plumbing Contractor Information Description of Work New Construction Plumbing Contractor's Company Name Plumbing Contractor's Company Name	m Walker (Clary mechanicals Im Email Address) # Baths 2 / 2 919-560-4833
Description of Work New Construction Plumbing Contractor Information Description of Work New Construction Plumbing Contractor's Company Name 3160A VIOSON Rd Clouton Neat527	myarer conyimechanicals for Email Address m # Baths 2 / 2 A19-560-4833 Telephone
Description of Work New Construction Thortons Plumbing Plumbing Contractor Information Plumbing Contractor's Company Name 3160A Vinson Rd Clayton Nc27527 Address 22152	m Walker (Clary mechanicals Im Email Address) # Baths 2 / 2 919-560-4833
Description of Work New Construction I hortons Plumbing Plumbing Plumbing Plumbing Contractor's Company Name 3160A Vinson Rd Clayton NC27527 Address 22152 License #	m Haths 2/2 Algorithm Address Email Address Email Address
Address License # Plumbing Contractor Information Description of Work New Construction Plumbing Contractor's Company Name 3160A Vinson Rd Clayton Nc27527 Address 22152 License # Insulation Contractor Information	m Haths 2 /2 Algorithm Address Email Address Email Address
Description of Work New Construction I hortons Plumbing Plumbing Plumbing Plumbing Plumbing Plumbing Contractor's Company Name 3160A Vinson Rd Clayton Nc27527 Address 22152 License #	m Haths 2/2 Algorithm Address Email Address Email Address

*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 Hamett 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 curelit fee schedule.

Owner/Contractor/Officer(s) of Corporation

6/16/2021

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 Sign w/Title: