



Application # _____

Harnett County Central Permitting

420 McKinney Pkwy Lillington, NC 27546

PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: ISAAC MOONEYHAM Date 2/8/2022
Site Address: 334 KIPLING RD, FURVAY-VARINA 27526 Phone _____
Subdivision: BM 2019 P. 215 Lot 1E
Description of Proposed Work: SINGLE FAMILY RESIDENCE Total Job Cost 425,000.00

General Contractor Information

JAMES S. ADCOCK III GENERAL CONTRACTOR Telephone 919 524 9864
Building Contractor's Company Name
135 N. MAIN ST. FURVAY VARINA NC 27526 Email Address JSA@ADCOCKFIRM.COM
Address
73395 HEATED SQ FT 2577 GARAGE SQ FT 896 UNHEATED
License # 631 HEATED

Electrical Contractor Information

Description of Work NEW ROUGH + TREM Service Size: 200 Amps T-Pole: X Yes ___ No ___
BLUEFIN ELECTRIC Telephone 919 285 0820
Electrical Contractor's Company Name
9217 PURFOY RD FURVAY-VARINA NC 27526 Email Address bluefinelectrical@gmail.com
Address
SP. SFD. 32399
License #

Mechanical/HVAC Contractor Information

Description of Work NEW INSTALL ROUGH + TREM
B+T HVAC SERVICES INC. Telephone 919 362 5846
Mechanical Contractor's Company Name
699 EAST ST PITTSBORO NC 27312 Email Address office@bthvac.com
Address
H.14645
License #

Plumbing Contractor Information

Description of Work NEW INSTALL ROUGH + TREM # Baths 5
TOMMY ALLEN PLUMBING Telephone 919 552 6902
Plumbing Contractor's Company Name
8728 CLEAR POOL LN WILLOW SPRING NC 27592 Email Address tommy.allen.plumbing.nc@gmail.com
Address
33728 P2
License #

Insulation Contractor Information

STEPHENS BUILDING PRODUCTS Telephone 919-937-8479
Insulation Contractor's Company Name & Address
1220 CORPORATION PARKWAY STE. 116
RALEIGH NC 27610

*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

2/8/2022

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:  _____

Date: 2/8/2022