

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: KMB Building LLC Date: 6-29-20  
Site Address: 2861 Oak Grove Church Rd Angier Phone: 919-669-7140  
Subdivision: N/A Lot: 5  
Description of Proposed Work: New SFD

**General Contractor Information**

Keith Michael Brown 919-669-7140  
Building Contractor's Company Name Telephone  
5609 Stewart Rd, Raleigh NC 27603 KMBC11@gmail.com  
Address Email Address  
51713

**Electrical Contractor Information**

Description of Work New SFD Service Size: 200 Amps T-Pole:  Yes  No  
The Alpha & Omega Electric Co of NC LLC 919-669-3418  
Electrical Contractor's Company Name Telephone  
1084 Lake Ridge Dr, Creedmoor NC 27522 Ludwigelectrical@gmail.com  
Address Email Address  
24828

**Mechanical/HVAC Contractor Information**

Description of Work New Residential SFD  
Certified Heating & Air Conditioning 910-858-0000  
Mechanical Contractor's Company Name Telephone  
PO Box 1071 Hope Mills NC 28348 Certifiedheatair@gmail.com  
Address Email Address  
20012 H2C1

**Plumbing Contractor Information**

Description of Work New SFD # Baths 2  
Thornton's Plumbing Inc 919-550-4833  
Plumbing Contractor's Company Name Telephone  
3160-A Vinson Rd, Clayton NC 27527 TPI Office 2@gmail.com  
Address Email Address  
22152

**Insulation Contractor Information**

Tatum Insulation II Garner NC 919-661-0999  
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.

*Keith Brown*  
Signature of Owner/Contractor/Officer(s) of Corporation

6-15-20  
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: *KMS* Member

Date: 6-15-20