



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: Perfect Image Construction, LLC Date: 8-25-20
Site Address: 116 Highland Dr, Lillington, NC 27546 Phone: 919-418-6205
Subdivision: Scotch Plains Lot: 6
Description of Proposed Work: Single Family New Home

General Contractor Information

Jess E. Adams 919-427-9895
Building Contractor's Company Name Telephone
54 Tudor Way, Angier, NC 27501 jadams711@gmail.com
Address Email Address
68446
License #

Electrical Contractor Information

Description of Work Single Family New Home Service Size: 200 Amps T-Pole: Yes No
BP Electric Service, Inc 919-468-1848
Electrical Contractor's Company Name Telephone
402 Holtz Lane, Cary, NC 27511 B800@bellsouth.net
Address Email Address
22661 SP FFD
License #

Mechanical/HVAC Contractor Information

Description of Work New Single Family Home
Stephenson Heating + Air, Inc 919-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr., Garner, NC 27529 stephensonheatingandair.com
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work New Single Family Home # Baths 2
Andy's Plumbing, LLC 919-333-4605
Plumbing Contractor's Company Name Telephone
162 Serenity Dr., Smithfield, NC 27577 andys.plumbing@hotmail.com
Address Email Address
29334
License #

Insulation Contractor Information

Tatum Insulation II, Inc. 519 Old Drug Store Rd. 919-661-0999
Insulation Contractor's Company Name & Address Telephone
Garner, NC 27529

***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.

Jim Clam (Perfect Image Constr., LLC) 8-25-20
Signature of Owner/Contractor/Officer(s) of Corporation 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: *Jim Clam* 8-25-20
Managing Partner