



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

Application for Residential Building and Trades Permit

Owner's Name: Kathryn Hope Buchanan Date: 1/12/2021
Site Address: 857 Holly Springs Church Rd Broadway NC 27505 Phone: 919/478-6750
Subdivision: _____ Lot: _____
Description of Proposed Work: New Residential Total Job Cost: _____

General Contractor Information

Cooper Tacia General Contracting Company 919/777-2826
Building Contractor's Company Name Telephone
306 Parham St. Suite 200A Raleigh NC 27601 mary.pierce@cooper-tacia.com
Address Email Address
65299 HEATED SQ FT 5,249 GARAGE SQ FT 868
License #

Electrical Contractor Information

Description of Work New residential Electrical Service Size: 600 Amps T-Pole: Y Yes ___ No
Rick Billings (Billing Electric Company) 919/258-3115
Electrical Contractor's Company Name Telephone
736 John Rosser Rd. Sanford NC 27332 rickbillingsbec@gmail.com
Address Email Address
18798-U
License #

Mechanical/HVAC Contractor Information

Description of Work New residential Mechanical
b & fix 919-234-7596
Mechanical Contractor's Company Name Telephone
P.O. Box 90157 Raleigh NC 27675 nick@bandfix.com
Address Email Address
30683
License #

Plumbing Contractor Information

Description of Work New Residential Plumbing # Baths _____
Paradise Homes 919/842-0746
Plumbing Contractor's Company Name Telephone
8087 NC 222 Kenly NC 27542 coxsepticandgrading@gmail.com
Address Email Address
30991
License #

Insulation Contractor Information

Prime Energy Group 2300 Westinghouse 919/882-1324
Insulation Contractor's Company Name & Address Telephone
Bldg Suite 105
Raleigh, NC 27604

***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.

May Pierce
Signature of Owner/Contractor/Officer(s) of Corporation

1/12/2021
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: May Pierce, Controller Date: 1/12/2021