



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: On Top Building Company LLC Date: 10.19.2020
Site Address: 1291 Bill Avery Rd. Coats NC 27521 Phone: 919.201.1133
Subdivision: N/A Lot: 4
Description of Proposed Work: New Residential Dwelling Total Job Cost: \$210,000.00

General Contractor Information

On Top Building Company, LLC 919.201.1133
Building Contractor's Company Name Telephone
2393 Twin Acres Rd., Clayton NC 27520 brandiereator@gmail.com
Address Email Address
71416 HEATED SQ FT 1614 GARAGE SQ FT 489
License #

Electrical Contractor Information

Description of Work New Construction Res. Build Service Size: 200 Amps T-Pole: Yes No
R. A. Jackson Electric 919.894.5367
Electrical Contractor's Company Name Telephone
9261 Raleigh Rd., Benson NC 27504 rajacksonelectric@embargmail.com
Address Email Address
21144
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction Res. Build
Stephenson Heating and Air 919.329.0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Drive, Garner NC 27529 stephenson hvac@aol.com
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work New Construction Res. Build # Baths 2
White's Plumbing 919.496.6929
Plumbing Contractor's Company Name Telephone
P.O. Box 1286, Youngsville NC 27596 whitesplumbing16@gmail.com
Address Email Address
16941
License #

Insulation Contractor Information

Tatum Insulation 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.

Blandie H. Robertson
Signature of Owner/Contractor/Officer(s) of Corporation

10.19.2020
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: Blandie H. Robertson, Owner Date: 10.19.2020