

Change of Subcontractor

Application # SFD-2010-0102

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: ABJ Investments Date: \_\_\_\_\_  
 Site Address: 81 Hazelwood Rd Phone: 910-401-5505  
 Subdivision: South Creek Lot: 06  
 Description of Proposed Work: \_\_\_\_\_ Total Job Cost: \_\_\_\_\_

**General Contractor Information**

Gary Robinson Homes 910-401-5505  
 Building Contractor's Company Name Telephone  
6200 Ramsey St Ste 200 Fayetteville NC 28311 rhonda.grhomes@gmail.com  
 Address Email Address

**HEATED SQ FT**

**GARAGE SQ FT**

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size: \_\_\_\_\_ Amps T-Pole: Yes No  
JHP Electrical Contractors 910-820-0837  
 Electrical Contractor's Company Name Telephone  
81 Beaver Creek Dr Dunn NC 28334 yason@yasonhpopeelectrical.com  
 Address Email Address  
27284 0  
 License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_  
 Mechanical Contractor's Company Name Telephone  
 Address Email Address  
 License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_  
 Plumbing Contractor's Company Name Telephone  
 Address Email Address  
 License # \_\_\_\_\_

**Insulation Contractor Information**

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.**

*Rheume*

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

4/28/21  
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: \_\_\_\_\_

Application # SFD-2010-0103

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

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**Application for Residential Building and Trades Permit**

Owner's Name: ABJ Investments Date: 4/28/21  
Site Address: 58 Heath Dr Phone: 910-401-5505  
Subdivision: South creek Lot: 44  
Description of Proposed Work: \_\_\_\_\_ Total Job Cost: \_\_\_\_\_

**General Contractor Information**

Cam Robinson Homes 910-401-5505  
Building Contractor's Company Name Telephone  
6200 Ramsey St Ste 200 Fayetteville NC rhonda.grhomes@gmail.com  
Address 28311 Email Address

**HEATED SQ FT** \_\_\_\_\_ **GARAGE SQ FT** \_\_\_\_\_

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work Electrical on NEW Service Size: \_\_\_\_\_ Amps T-Pole: Yes No  
JHP Electrical Contractors LLC 919-820-0837  
Electrical Contractor's Company Name Telephone  
81 Beaver Creek Dr Dunn NC jason@jasonhpoppelectrical.com  
Address 28334 Email Address  
27284 U  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_  
Mechanical Contractor's Company Name Telephone  
Address Email Address  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_  
Plumbing Contractor's Company Name Telephone  
Address Email Address  
License # \_\_\_\_\_

**Insulation Contractor Information**

Insulation Contractor's Company Name & Address Telephone

**\*NOTE: General Contractor / owner must fill out and sign the second page of this application.**

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**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]*  
Signature of Owner/Contractor/Officer(s) of Corporation

4/28/21  
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

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Sign w/Title: \_\_\_\_\_ Date: \_\_\_\_\_



Change of Subcontractor

Application # SFP-2010-0099

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

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Application for Residential Building and Trades Permit

Owner's Name: A B Investments Date:
Site Address: 59 Indigo St Phone: 910-401-5505
Subdivision: South Creek Lot: 55
Description of Proposed Work: Total Job Cost:

General Contractor Information

Gary Robinson Homes 910-401-5505
Building Contractor's Company Name Telephone
200 Ramsey St Ste 200 Fayetteville NC rhonda.grhomes@gmail.com
Address 28311 Email Address

HEATED SQ FT GARAGE SQ FT

License #

Electrical Contractor Information

Description of Work NEW SFD Service Size: Amps T-Pole: Yes No
JHP Electrical Contractors LLC 919-820-0837
Electrical Contractor's Company Name Telephone
2 Beaver Creek Dr Dunn NC 28534 jason@jasonhpoppelectrical.com
Address 27284 U Email Address

License #

Mechanical/HVAC Contractor Information

Description of Work
Mechanical Contractor's Company Name Telephone
Address Email Address
License #

Plumbing Contractor Information


Description of Work # Baths
Plumbing Contractor's Company Name Telephone
Address Email Address
License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address Telephone

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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**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

4/29/21  
\_\_\_\_\_  
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

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Sign w/Title: \_\_\_\_\_ Date: \_\_\_\_\_

Application # SFD 2010-0100

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**Application for Residential Building and Trades Permit**

Owner's Name: APJ Investments Date: \_\_\_\_\_  
 Site Address: 12th Thunder Valley Ct. Phone: 910-401-5505  
 Subdivision: South Creek Lot: 73  
 Description of Proposed Work: \_\_\_\_\_ Total Job Cost: \_\_\_\_\_

**General Contractor Information**

Gary Robinson Homes 910-401-5505  
 Building Contractor's Company Name Telephone  
6200 Ramsay St Ste 200 Fayetteville NC rhonda.grhomes@gmail.com  
 Address 28311 Email Address .com

**HEATED SQ FT** \_\_\_\_\_ **GARAGE SQ FT** \_\_\_\_\_

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size: \_\_\_\_\_ Amps T-Pole: Yes No

JHP Electrical Contractors LLC 910-820-0837  
 Electrical Contractor's Company Name Telephone  
81 Beaver Creek Dr Dunn NC 28324 jason@jasonhpoppeelectrical.com  
 Address Email Address

27284  
 License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_

Mechanical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_

Plumbing Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License # \_\_\_\_\_

**Insulation Contractor Information**

Insulation Contractor's Company Name & Address \_\_\_\_\_ Telephone \_\_\_\_\_

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*Rheanne*

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

4/28/21

Date

**Affidavit for Worker's Compensation N.C.G.S. 87-14**

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\_\_\_\_\_ General Contractor    \_\_\_\_\_ Owner    \_\_\_\_\_ Officer/Agent of the Contractor or Owner

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