



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: ABJ Investments Date: 10/28/2020

Site Address: PO Box 361, Fayetteville, NC 28302 Phone: _____

Subdivision: South Creek Lot: 44

Description of Proposed Work: Single Family - New Construction Total Job Cost: \$ 209,000⁰⁰

General Contractor Information

Gary Robinson Homes, LLC
Building Contractor's Company Name
6200 Ramsey St, Suite 200, Fay, NC 28311
Address

Patsy Remote 910-322-3127
Office - 910-401-5505
Telephone
patsy.grhomes@gmail.com
Email Address

67530 unlimited HEATED SQ FT 2252 GARAGE SQ FT 719
License #

Electrical Contractor Information

Description of Work: Single Family - New Construction Service Size: 200 Amps T-Pole: X Yes No

Bugord Electric
Electrical Contractor's Company Name
PO Box 64333, Fayetteville, NC 28306
Address

910-723-1937
Telephone
diana.bugordelectric@gmail.com
Email Address

314244
License #

Mechanical/HVAC Contractor Information

Description of Work: Single Family / New Construction

Certified Heating & Air
Mechanical Contractor's Company Name
PO Box 1074, Hope Mills, NC 28348
Address

910-858-0000
Telephone
Ehrin.certified@gmail.com
Email Address

H3C1-20012
License #

Plumbing Contractor Information

Description of Work: Single Family / New Construction # Baths: _____

Dell Haire Plumbing
Plumbing Contractor's Company Name
PO Box 65048, Fayetteville NC 28306
Address

910-429-9939
Telephone
dellhaireplumbing@hotmail.com
Email Address

32896
License #

Insulation Contractor Information

Cumberland Insulation Inc.
Insulation Contractor's Company Name & Address

910-484-7118
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.



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

11/30/2020

Date

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

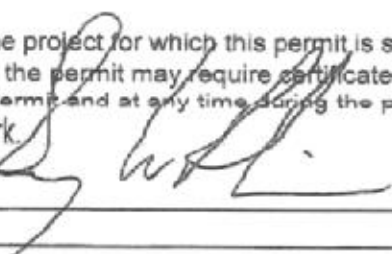
The undersigned applicant being the:

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: 

Date: 11/30/2020