



Harnett COUNTY

Application # SFA2011-0054

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: Andrew Buland Date: 12-14-20  
Site Address: 155 Mockingbird Lane Sh 28390 Phone: 4065808128  
Subdivision: N/A Lot: N/A  
Description of Proposed Work: New Residential Total Job Cost: 300,000

**General Contractor Information**

MarketPlace Builders LLC Telephone: 9109872900  
Building Contractor's Company Name  
3102 W. Main St Hope Mills 28348 MarketplaceBuilders  
Address Email Address  
68661 a@gmail.com  
License #

**Electrical Contractor Information**

Description of Work: New Residential Service Size: 400 Amps T-Pole:  Yes  No  
Farmers Electrical Telephone: 9197700066  
Electrical Contractor's Company Name  
67858 Appain Way Hope Mills 28348 Rfarmerfec@gmail.com  
Address Email Address  
17363-L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work: New Residential  
Certified Heating & Air Telephone: 9108500000  
Mechanical Contractor's Company Name  
P.O. Box 1071 Hope Mills 28348 CertifiedHeatingandAirllc@gmail.com  
Address Email Address  
20012 H 203  
License #

**Plumbing Contractor Information**

Description of Work: New Residential # Baths: 3  
Kevin Jones Plumbing Telephone: 9109783288  
Plumbing Contractor's Company Name  
6879 Family St Fay 28314 KevinJonesplumbing@nc.rr.com  
Address Email Address  
27018 P-1  
License #

**Insulation Contractor Information**

Cumberland Insulation Telephone: 9104847118  
Insulation Contractor's Company Name & Address

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

12-14-20  
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: [Signature] Member Manager Date: 12-14-20