

Application # Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Each section below to be filled out 910-893-7525 Fax 910-893-2793 www.harnett.org/permits by whomever performing work. Must be owner/occupier or licensed contractor. Address, company Application for Residential Building and Trades Permit name & phone must match information on license. Owner's Name: KB Home Raleigh Durham Inc. __ Date: <u>10/14/2020</u> TBD Harlow Court Phone: 919 768 7995 Site Address: Lot: ³⁸ Subdivision: Highland Grove Description of Proposed Work: New Single Family Total Job Cost: 116,394 **General Contractor Information** KB Home Raleigh Durham Inc. 919-768-7995 Building Contractor's Company Name Telephone 4506 S Miami Blvd Suite 100 Durham, NC 27703 lbaune-x@kbhome.com Email Address Address GARAGE SQ FT 422 1446 53775 HEATED SQ FT License # **Electrical Contractor Information** Description of Work New Single Family Residential Service Size: 600 Amps T-Pole: x Yes No Raleigh Lanehart Electric Co. Inc. 919 303 6266 Telephone Electrical Contractor's Company Name verlinda@lanehart.com 1120 Burma Drive Apex, NC 27539 Address **Email Address** 24986-U License # **Mechanical/HVAC Contractor Information** Description of Work New Single Family Residential Maynor HVAC 919-361-0993 Mechanical Contractor's Company Name Telephone 1000 Goodworth Drive Apex. NC 27539 gerald@maynorhvac.com Address Email Address 12309 License # **Plumbing Contractor Information** 2 Description of Work New Single Family Residential # Baths Celey's Quality Services 919-938-1813 Plumbing Contractor's Company Name Telephone service@celeys.com 636 Old Roberts Road Benson, NC 27504 Email Address Address 32853 License # **Insulation Contractor Information** 919-790-9684 Tri City Insulation 7204 Becky Circle Raleigh, NC 27615 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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

Lisa Baune

12.28.20

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

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

Date

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:

X 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.

<u>x</u> 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:	Lisa Baune	DUP Permit Coordinator	Date:	12.28.20