

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: KB Home Raleigh Durham Inc.		Date: _	10/14/2020
Site Address: 350 Windy Farm Dr	Phone:	919 76	8 7995
Subdivision: Highland Grove	Lot:	9	
Description of Proposed Work: New Single Family		120,6	58
General Contractor Information	_		
KB Home Raleigh Durham Inc. Building Contractor's Company Name	919-768-7995 Telephone	5	
4506 S Miami Blvd Suite 100 Durham, NC 27703 Address	<u>Ibaune-x@kbh</u> Email Address	nome.cor	<u>n</u>
_53775 HEATED SQ FT 1773 GARAGE SQ	FT 424		
License # Electrical Contractor Information	1		
Description of Work New Single Family Residential Service Size:	<u>.</u> 600	ole: <u>x</u>	YesNo
Raleigh Lanehart Electric Co. Inc. Electrical Contractor's Company Name	919 303 6266 Telephone		
1120 Burma Drive Apex, NC 27539 Address	verlinda@lane Email Address	hart.com	1
24986-U License # Machanical/HVAC Contractor Inform	ation		
Mechanical/HVAC Contractor Information (IV)	ation		
Description of Work New Single Family Residential		=	
Maynor HVAC Mechanical Contractor's Company Name	919-361-0993 Telephone		
	•		
1000 Goodworth Drive Apex, NC 27539 Address	gerald@mayn Email Address	<u>orhvac.c</u>	<u>om</u>
12309	Linaii Addie33		
License #			
Plumbing Contractor Information	<u>1</u>		
Description of Work New Single Family Residential	_# Baths2		
Celey's Quality Services	919-938-1813		
Plumbing Contractor's Company Name	Telephone		
636 Old Roberts Road Benson, NC 27504	service@celey	/s.com	
Address	Email Address		
32853			
License #	_		
Insulation Contractor Information	_ '	4	
Tri City Insulation 7204 Becky Circle Raleigh, NC 27615	919-790-9684	+	
Insulation Contractor's Company Name & Address	Telephone		

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



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.

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Lisa Baune 1.7.21	
Signature of Owner/Contractor/Officer(s) of Corporation Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
General Contractor Ownerx 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 Bauns DUP Permit Coordinator Date: 1.7.21	