



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: Floyd Properties and Development Date: 12/17/20
Site Address: 245 Education Drive, Spring Lake, NC 28390 Phone: (910) 423-6700
Subdivision: Anderson Creek Club Lot: 1147
Description of Proposed Work: New Construction Single Family Total Job Cost: \$201,520⁰⁰

General Contractor Information

Floyd Properties and Development (910) 423-6700
Building Contractor's Company Name Telephone
901 Arsenal Avenue, Fayetteville, NC 28305 juanita@floydprop.com
Address Email Address
74174 HEATED SQ FT 2519 GARAGE SQ FT 680
License #

Electrical Contractor Information

Description of Work New Construction Service Size: 200 Amps T-Pole: Yes No
Buford Electric (910) 723-1937
Electrical Contractor's Company Name Telephone
2878 Gillespie St, Fayetteville, NC 28306 bufordelectric@gmail.com
Address Email Address
31424-U
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Chacco (910) 237-0779
Mechanical Contractor's Company Name Telephone
1910 Pamalee Dr, Fayetteville, NC 28301 chacco@embarqmail.com
Address Email Address
PH 2-3, 15108
License #

Plumbing Contractor Information

Description of Work New Construction # Baths 3
Vance Johnson Plumbing (910) 424-6712
Plumbing Contractor's Company Name Telephone
3242 Mid-Pine Dr, Fayetteville, NC 28306 lgoudy@vjplumbing.com
Address Email Address
NC 7756
License #

Insulation Contractor Information

A-1 Insulation PO Box 180, Hope Mills, NC (910) 429-2990
Insulation Contractor's Company Name & Address Telephone
28348

*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

12/17/20

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:  _____ Date: 12/17/20