



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 or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Triangle Home Pros Date: 3/16/21  
Site Address: 672 Rollins Mill Rd Holly Springs, NC Phone: 919 346 1528  
Subdivision: \_\_\_\_\_ Lot: 1  
Description of Proposed Work: New SFH

**General Contractor Information**

Triangle Home Pros  
Building Contractor's Company Name  
6312 Lauraca Ln Fuquay Varina, NC  
Address  
77019  
License #

919 346 1528  
Telephone  
THPHOMES@GMAIL.COM  
Email Address

**Electrical Contractor Information**

Description of Work Wire New Home Service Size: 200 Amps T-Pole:  Yes  No  
NEC Power  
Electrical Contractor's Company Name  
117 Wild Blossom Dr, Apex, NC  
Address  
28370U  
License #

919 608 3826  
Telephone  
MNICLAWS@NECPower.com  
Email Address

**Mechanical/HVAC Contractor Information**

Description of Work HVAC New Home  
JC's Heating & Air  
Mechanical Contractor's Company Name  
1539 Wade Stephenson Holly Springs, NC  
Address  
HY312655  
License #

919 552 3053  
Telephone  
JOSHVAC@GMAIL.COM  
Email Address

**Plumbing Contractor Information**

Description of Work Plumb New Home  
All-Max Plumbing  
Plumbing Contractor's Company Name  
2428 Reliance Ave, Apex NC  
Address  
29022  
License #

# Baths \_\_\_\_\_  
919 678 0111  
Telephone  
VICKY@All-MaxPlumbing.com  
Email Address

**Insulation Contractor Information**

Stephens Building Products  
Insulation Contractor's Company Name & Address  
1200 Corporation Parkway, Raleigh, NC

919 937 8479  
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.

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

3/16/2021  
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: Brian Cohen Operations Manager Date: 3/16/2021