



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: Angle Development LLC. Date: 4/12/2021
Site Address: 292 Kivett Rd. Lillington, NC 27546 Phone: 919-602-2351
Subdivision: _____ Lot: _____
Description of Proposed Work: Build 1 single family homes

General Contractor Information

Statera Builders LLC 919-995-0711
Building Contractor's Company Name Telephone
1108 Sky Point Ct. Raleigh, NC 27603 tim@staterabuilders.com
Address Email Address
78808
License # Heated Sq FT 480

Electrical Contractor Information

Description of Work Provide electrical for new home Service Size: 150 Amps T-Pole: Yes No
Neuse River Electric 919-740-7086
Electrical Contractor's Company Name Telephone
1113 Clayton Rd, Angier, NC 27501 neuseriverelectric@gmail.com
Address Email Address
L30031
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC for new home
B&J Heating & AC Service, Inc. 910-893-8057
Mechanical Contractor's Company Name Telephone
PO Box 737 Buies Creek, NC 27506 bensheatac@charter.net
Address Email Address
L. 20380
License #

Plumbing Contractor Information

Description of Work Plumbing for new home # Baths 1
Plumb Level Plumbing & Construction 919-816-6852
Plumbing Contractor's Company Name Telephone
3019 Plain View Church Rd. Angier, NC 27501 wesley.dailey71@gmail.com
Address Email Address
27929 Class 1
License #

Insulation Contractor Information

Will Cee Insulation 919-805-8539
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 **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.

Timothy J Server
Signature of Owner/Contractor/Officer(s) of Corporation

4-12-2021
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: Timothy J Server - Owner

Date: 4-12-2021