



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: Landry Builders Date: 5/13/2021
Site Address: Rosser Pittman Rd Phone: 910-624-8354
Subdivision: _____ Lot: 3
Description of Proposed Work: New Construction Total Job Cost: \$300,000.00

General Contractor Information

NL Builders LLC 910-651-0544
Building Contractor's Company Name Telephone
3209 Elms Thape Dr. Fayetteville NC Nicholas.alan09@icloud.com
Address 28312 Email Address
75234 HEATED SQ FT 1937 GARAGE SQ FT 500
License #

Electrical Contractor Information

Description of Work New Construction Service Size: 200 Amps T-Pole: Yes No
Allman Electrical 919-443-9694
Electrical Contractor's Company Name Telephone
345 Wilkes Rd Fay. NC 28312 Email Address
Address
6136-U
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Certified Heating + Air 910-858-0000
Mechanical Contractor's Company Name Telephone
207 W David Powell Road NC Email Address
Address
20012
License #

Plumbing Contractor Information

Description of Work New Construction # Baths 2
McDonald Plumbing 919-770-0773
Plumbing Contractor's Company Name Telephone
5321 Swann Station Rd Sanford NC 27332 Email Address
Address
11824
License #

Insulation Contractor Information

Cumberland Insulation CO Inc. 4205 Clinton Rd (910) 484-7118
Insulation Contractor's Company Name & Address Lander NC 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.

[Handwritten Signature]

5-13-2021

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 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:

[Handwritten Signature] President

Date:

5-13-2021