

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: A&G Residential, LLC	Date:
Site Address: 359 Pendegraft Rd. Bunnlevel NC 28323	
Subdivision:	
Description of Proposed Work: New Single Family Construction	
General Contractor Infor	rmation_
A&G Residential, LLC	910-779-0229
Building Contractor's Company Name	Telephone
916 Arsenal Ave Suite B Fayetteville, NC 28305	jenn@agresidentialnc.com
Address	Émail Address
	AGE SQ FT 250
License #	
Description of Work Single Family Electric Service	
Ogilyia Enterprises Inc	919-337-7633
Electrical Contractor's Company Name	Telephone
5325 Hidwell Place Apex, NC 27539	ogilvieelectric1994@gmail.com
Address	Email Address
17046-U	
License #	
Mechanical/HVAC Contractor	Information
Description of Work Single Family HVAC	
Carolina Comfort Air	910-339-2374
Mechanical Contractor's Company Name	Telephone
703 N. Clinton Ave Dunn, NC 28334	RNC_Fayetteville@carolinacomfortair.com
Address	Email Address
29077 H3-1	
License #	
Plumbing Contractor Info	
Description of Work Single Family Plumbing	# Baths_2.5
Titan's Plumbing, LLC	919-615-1947
Plumbing Contractor's Company Name	Telephone
1634 Brock Fern Way Raleigh, NC 27609	business@titansplumbing.com
Address	Email Address
34800	
License # Insulation Contractor Info	ormation
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Tricity Insulation 3154 Camden Rd. Fayetteville NC 28306 Insulation Contractor's Company Name & Address	910-486-8855 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.		
Jenn Wagner       06/29/2021         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 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:	:	
$\underline{X}$ 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.		
$\underline{x}$ 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: 06/29/2021		