

Application # _____

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Harold & Anna Moore, Gregory Inc will be owner after 8	3/20/21	
Date <u>8-12-21</u>		
Site Address: 3498 NC 55 W Angier, NC 27501		
Phone <u>919-422-8130</u>		
Subdivision: none		
Description of Proposed Work: <u>build new 1155 sqft home</u>	Total Job	
Cost\$165k		
General Contractor Information	1	
Gregory Inc	9194228130	
Building Contractor's Company Name	Telephone	
800-A. N. Raleigh St Angier NC 27501	Gregoryinclanman@gmail.com	
Address	Email Address	
	GE SQ FTN/A_	
Electrical Contractor Informatio		
	ce Size:200Amps T-Pole:Y	
Yes_No Queh Well gue	into before	
Electrical Contractor's Company Name	Telephone	
Address & 1Z d	Email Address	
License #		
Mechanical/HVAC Contractor Information		
Description of WorkHVAC for new home		
Polar Bear Heating & Air		
Mechanical Contractor's Company Name	Telephone	
55 E Main St Coats NC		
Address	Email Address	
30048		
License #		
Plumbing Contractor Information	<u>n</u>	
Description of Work Plumb new home	# Baths 2	
Barnes Plumbing		
Plumbing Contractor's Company Name	Telephone	
239 Millwood Ln Angier		



NORTH CAROLINA		
Address	Email Address	
17735		
License # Insulation Contractor Information		
	_	
Insulating Inc Insulation Contractor's Company Name & Address	919-772-9000 Telephone	
The same of the sa	respiration	
*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.		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
	of the Contractor or Owner	
Do hereby confirm under penalties of perjury that the person(s), firm(s) of set forth in the permit:		
Has three (3) or more employees and has obtained workers' com	pensation insurance to cover them.	
Has one (1) or more subcontractors(s) and has obtained workers them.	compensation insurance to cover	
Has one (1) or more subcontractors(s) who has their own policy covering themselves.	f workers' compensation insurance	
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: 8-12-21		
Sign w/Title: Man Olizon, Vice Tresident	Date: 3 12 21	