



Application # _____

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

* 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: Carroll Construction Homes, INC Date 12/6/2021
 Site Address: _____ Phone 919-868-7700
 Subdivision: HAVEN Lot 63
 Description of Proposed Work: NEW RESIDENTIAL Total Job Cost 255,000

General Contractor Information

G.C. ADAMS Construction, INC. 919-868-7700
 Building Contractor's Company Name Telephone
10000 Raleigh Road Benson NC 27504 cameron.adams1087@gmail.com
 Address Email Address
81270 HEATED SQ FT 1490 GARAGE SQ FT 500
 License #

Electrical Contractor Information

Description of Work NEW RESIDENTIAL Service Size: 200 Amps T-Pole: Yes No
R.A. JACKSON Electric 919-894-5367
 Electrical Contractor's Company Name Telephone
9261 Raleigh ROAD Benson NC 27504
 Address Email Address
211445FD
 License #

Mechanical/HVAC Contractor Information

Description of Work NEW RESIDENTIAL
Stephenson Heating & AIR INC 919-329-0686
 Mechanical Contractor's Company Name Telephone
343 Shipwash DR GARNER NC 27529
 Address Email Address
18644
 License #

Plumbing Contractor Information

Description of Work NEW RESIDENTIAL # Baths 2
Ambit Plumbing 919-934-1379
 Plumbing Contractor's Company Name Telephone
755 Rock Pillar RD CLAYTON NC 27520
 Address Email Address
20823
 License #

Insulation Contractor Information

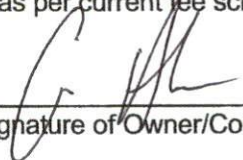
TATUM INSULATION II 519 OLD BUG STORE RD 919-661-0999
 Insulation Contractor's Company Name & Address Telephone
GARNER NC 27529

*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.



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

12/11/2021

 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:

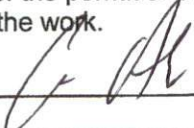
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  PRESIDENT _____ Date: 12/11/2021