

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: Cappil Construction Homes, INC	Date 4/12/2022 Phone 919-868-7700
Site Address: 400 PLACTO POND DR. BROADWAY UK 2752	
Subdivision: LAVEN	Lot
Description of Proposed Work: NEW RESIDENTAL	Total Job Cost 285,000
General Contractor Information	
G.C. ADAMS Construction, INC	919-568-7700
Building Contractor's Company Name	Telephone
10000 RALEIGH RD Benson NC 27504	Cameron adams 1087e gmail. com
Address	Email Address
81270 HEATED SQ FT 1411 GARAGE SQ	FT 292
1.	
Description of Work WEW PESTA BUTAL Service Size:	Amps T-Pole: Yes No
Description of Work NEW RESTORUTE Service Size:	919-894-5367
Electrical Contractor's Company Name	Telephone
926\ Raleigh Roal Berson NC 27504	releptions
Address	Email Address
ZIIYSFD	
License #	
Mechanical/HVAC Contractor Information	
Description of Work NGW RESPORTBAL	
Stephenson's Heating ! ASR	919-329-0686
Mechanical Contractor's Company Name	Telephone
343 shipwash DR GARNER ME 27529	
Address	Email Address
18644	
License # Plumbing Contractor Information	
Description of Work NEW Residential	# Baths 3
Description of Work 1000 (Case)	919-625-0163
Plumbing Contractor's Company Name	Telephone
421 WANKINS ROAD CLAYTON NC 27520	Tolophono
Address	Email Address
25464	
License #	
Insulation Contractor Information	
FRIENDS JUBILLATION, LLC	919-291-2438
Insulation Contractor's Company Name & Address	Telephone
2001 BLOUNT CREEK LLAYTON NC 27520	



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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> and if <u>any</u> 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.

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

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:

strong roots • new growth