



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: David & Annie Duckworth Date 12-16-21
Site Address: 2769 Line Rd. Phone 910-783-7670
Subdivision: _____ Lot _____
Description of Proposed Work: Site Built SFD Total Job Cost 195,000

General Contractor Information

Value Build Homes Telephone 919-777-0393
Building Contractor's Company Name
3015 Jefferson Davis Hwy Sanford, NC Email Address tanm@valuebuildhomes.com
Address
SS372 HEATED SQ FT 2016 GARAGE SQ FT N/A
License #

Electrical Contractor Information

Description of Work Electrical for New SFD Service Size: 200 Amps T-Pole: Yes No
Wester's PACE Telephone 919-499-5389
Electrical Contractor's Company Name
1614 Leslie Rd. Sanford, NC Email Address williamwester@gmail.com
Address
U12007
License #

Mechanical/HVAC Contractor Information

Description of Work Mechanical for new SFD
Loflin HVAC Telephone 919-427-5415
Mechanical Contractor's Company Name
4912 Grasshopper Rd. Raleigh, NC Email Address bragals@netscape.com
Address
13341
License #

Plumbing Contractor Information

Description of Work Plumbing for new SFD # Baths 2
Baity Plumbing Telephone 336-475-0921
Plumbing Contractor's Company Name
4538 Lower Lake Rd. Thomasville, NC Email Address Rbaity4522@triad.rr.com
Address
20809
License #

Insulation Contractor Information

In City 334 E Mountain Dr. Fayetteville Telephone 919-237-8055
Insulation Contractor's Company Name & Address

***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

12/16/21

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: Start coordinator Date: 12/16/21