



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: Kyle & Nicole Pendergraft _____ Date 12/15/2021

Site Address: 649 Fred Burns Rd Holly Springs

Phone (919) 218-9788

Subdivision: _____ Lot _____

Description of Proposed Work: New Const - SFD Total Job Cost \$250,000

General Contractor Information

Southern Tide Homes, LLC _____ (919) 369-7804

Building Contractor's Company Name _____ Telephone

11917 NC HWY 210 Benson NC 27504 _____ Clay@southerntidehomes.net

Address _____ Email Address

81327 _____ **HEATED SQ FT** 1842 _____ **GARAGE SQ FT** 459 _____

License #

Electrical Contractor Information

Description of Work _____ Service Size: 300 Amps T-Pole: X Yes ___ No

Common Ground Electric _____ (919) 478-3092

Electrical Contractor's Company Name _____ Telephone

222 Fox Run Ct Benson NC 27504 _____ commongroundelectricnc@gmail.com

Address _____ Email Address

32654

License #

Mechanical/HVAC Contractor Information

Description of Work _____

My HVAC Guys _____ 919-938-8202

Mechanical Contractor's Company Name _____ Telephone

304 Stotts Mill Rd Wendell NC 27591 _____ brandon.baker@myhvacguysnc.com

Address _____ Email Address

84239 _____

License #

Plumbing Contractor Information

Description of Work _____ # Baths 2

Danny Sullivan Plumbing Inc _____ (919) 669-8860

Plumbing Contractor's Company Name _____ Telephone

P.O. Box 943 Coats NC 27521 _____ danksul2@gmail.com

Address _____ Email Address

22163 _____

License #

Insulation Contractor Information

Insulating Inc 2701 Rowland Rd Suite 300 Raleigh NC 27615 _____

Insulation Contractor's Company Name & Address _____ 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.

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

12/15/21
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: Clayton Roberts Member Date: 12/15/21