

Application # ______
Harnett County Central Permitting

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

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

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Owner's Name: Sam HoneycuH	Date 3/25/22	
Site Address: 9358 US 421 S	Phone (910) 379-7999	
Subdivision: NA	Lot VA	
Description of Proposed Work: Construction of New Single	Total Job Cost 400,000	
General Contractor Informat	ion	
Gibraltar Contracting LLC	— (919) 664-7066	
Building Contractor's Company Name	Telephone	
PO Box 1793	Trwimberly @ gmail. (om Email Address	
Address	Email Address	
83445 HEATED SQ FT 3020 GARAGE	SQ FT_NA	
License # , Electrical Contractor Informa	tion	
Description of Work Wew Construction Electrical Contractor Informa	e: 400 Amps T-Pole: Yes No	
Joseph Fredly	(919) 390-8954	
Electrical Contractor's Company Name	Telephone Josephfredley@ Hotmail.com	
1639 Farrell Rd Sanford NC 27330 Address	Email Address	
32169	Email Address	
License #		
Mechanical/HVAC Contractor Info	ormation	
Description of Work New Construction Mechanical		
HUAC Specialist INC	(919) 669-9509	
Mechanical Contractor's Company Name	relepriorie	
5843 Cokesburry Rd Figury Varing NL 27526 Address	Email Address	
22035	Email Address	
License #		
Plumbing Contractor Informa	tion	
Description of Work New Construction plumbing	# Baths	
LR Glover Plumbing INC	(919) 820-0026	
Plumbing Contractor's Company Name	Telephone	
DD BOX 764 Benson NC 25504	En all Address	
Address	Email Address	
7958 License #		
Insulation Contractor Information		
Cumberland Insulation	(910) 484- 7118	
Insulation Contractor's Company Name & Address	Telephone	



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

3/25/22

is as per current fee schedule.

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

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: 3 Low Member Manager Date: 3 25/32	

Mense Manager