



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: Skipballor LLC Date 2-5-22

Site Address: 176 Lambert Lane, Fuquay Varina, NC 27526 Phone 919-796-1547

Subdivision: Purfoy Place Lot 8

Description of Proposed Work: New Single Family Dwelling Total Job Cost \$425,000

**General Contractor Information**

Glover Design Build, LLC 919-818-1842

Building Contractor's Company Name Telephone

4405 River Down Drive, Raleigh, NC 27603 Gloverdesignbuild@gmail.com

Address Email Address

77510 HEATED SQ FT 2626 GARAGE SQ FT 495

License #

**Electrical Contractor Information**

Description of Work wire new single family dwelling Service Size: 200 Amps T-Pole: X Yes \_\_\_ No

Parnell Electric LLC 919-710-5230

Electrical Contractor's Company Name Telephone

11 Glenda Lane, Garner, NC 27529 jparnell@parnellelectric.com

Address Email Address

28143-L

License #

**Mechanical/HVAC Contractor Information**

Description of Work install HVAC, gas piping, hood vent for new single family dwelling

Stephenson Heating and Air 919-329-0686

Mechanical Contractor's Company Name Telephone

343 Shipwash Lane, Garner, NC 27529 stephensonhvac@aol.com

Address Email Address

18644

License #

**Plumbing Contractor Information**

Description of Work Plumb new single family dwelling # Baths 3

C&C Select Plumbing, LLC 919-625-0163

Plumbing Contractor's Company Name Telephone

.421 Watkins Road, Clayton, NC 27520 carlbjorling@gmail.com

Address Email Address

25464

License #

**Insulation Contractor Information**

Tatum Insulation II, Inc 519 Old Drugstore Rd, Garner, NC 27529 919-661-0999

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.**

*[Signature]*  
Signature of Owner/Contractor/Officer(s) of Corporation

2-5-22  
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: *[Signature]* / member manager

Date: 2-5-22