



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: J&K Properties of Fuquay Date \_\_\_\_\_  
Site Address: 224 Lambert Ln. Fuquay-Varina N.C. 27520 Phone 919-796-1543  
Subdivision: Purfoy Place Lot 10  
Description of Proposed Work: New Residential Total Job Cost 405K

**General Contractor Information**

Tart Custom Homes Inc. Marty Tart 919-669-1818  
Building Contractor's Company Name Telephone  
359 Truth Rd. New Hill N.C. 27562 tartm@hpcu.com  
Address Email Address  
58978 HEATED SQ FT 2651 GARAGE SQ FT 584  
License #

**Electrical Contractor Information**

Description of Work New Res. Service Size: 200 Amps T-Pole:  Yes  No  
Austin Dean Electrical 919-669-0063  
Electrical Contractor's Company Name Telephone  
2837 Baptist Grove Rd. Fu. N.C. 27526 austindeanelectrical@gmail.com  
Address Email Address  
L-29039  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Res.  
J.C.'s Heating & Air 919-369-2657  
Mechanical Contractor's Company Name Telephone  
1529 Wade Stephenson Rd. Holly Springs N.C. 27540 jcshvac@gmail.com  
Address Email Address  
H-3 12655  
License #

**Plumbing Contractor Information**

Description of Work New Res. # Baths 2.5  
Camdens Plumbing + Repair 919-669-4650  
Plumbing Contractor's Company Name Telephone  
P.O. Box 1359 Fu. N.C. 27526 camdensplumbingr@aol.com  
Address Email Address  
18903  
License #

**Insulation Contractor Information**

Insulation Inc. 5209 Fayetteville Rd. Raleigh 919-772-9000  
Insulation Contractor's Company Name & Address N.C. 27603 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.

Mary T. Co  
Signature of Owner/Contractor/Officer(s) of Corporation

2-10-22  
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: \_\_\_\_\_ Date: \_\_\_\_\_