



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: Gregory Inc _____ Date _____

Site Address: Lot 1^B Bethel Church Rd _____

Phone 919-422-8130

Subdivision: _____ Lot 1^B

Description of Proposed Work: build new house _____ Total Job Cost _____

General Contractor Information

Gregory Inc _____ 9194228130
Building Contractor's Company Name Telephone

800-A. N Raleigh St Angier, NC 27501 _____

Email Address Gregoryinlanman@gmail.com

36220 HEATED SQ FT 1364 GARAGE SQ FT

License #

Electrical Contractor Information

Description of Work wire new home _____ Service Size: 200 Amps T-Pole: x

Yes ___ No

Mabry's Electrical Service _____
Electrical Contractor's Company Name Telephone

731 Mabry Rd Angier, NC 27501 _____

Address _____ Email Address _____

U. 15077 _____

License #

Mechanical/HVAC Contractor Information

Description of Work install new hvac in new home _____

Polar Bear Heating and Air _____

Mechanical Contractor's Company Name Telephone

55 E Main St Coats NC 27521 _____ Email Address _____

L30048 _____

License #

Plumbing Contractor Information

Description of Work Plumb new home _____ # Baths 2

Barnes Plumbing _____ 919-422-2133 _____

Plumbing Contractor's Company Name Telephone

239 Millwood Ln _____

Address _____ Email Address _____

L.17735 _____

License #

Insulation Contractor Information

strong roots • new growth

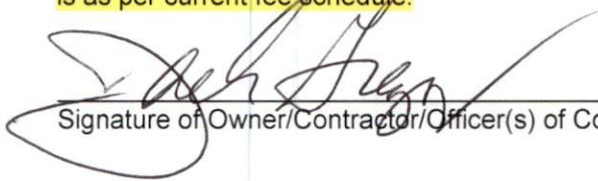
To-City
Insulation Contractor's Company Name & Address

919-772-9000
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 of Owner/Contractor/Officer(s) of Corporation

2-8-2022
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:  - Vice-President Date: 2-8-2022