

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: Raynor Builders Date _____
Site Address: 16 Isabella Street, Coats, NC 27521 Phone 919-639-2011
Subdivision: _____ Lot _____
Description of Proposed Work: New Single Family Dwelling Total Job Cost 178,000

General Contractor Information

Raynor Builders Inc 919-639-2011
Building Contractor's Company Name Telephone
725 N. Raleigh Street, Angier, NC 27501 raynorbuildersinc@gmail.com
Address Email Address
40079 HEATED SQ FT 1296 GARAGE SQ FT _____
License # _____

Electrical Contractor Information

Description of Work Wire new house Service Size: 200 Amps T-Pole: Yes No
Mabry Electrical Service Inc. 919-639-4837
Electrical Contractor's Company Name Telephone
731 Mabry Road, Angier, NC 27501 amber@mabryelectrical.com
Address Email Address
15077-4
License # _____

Mechanical/HVAC Contractor Information

Description of Work New HVAC system new house
Stephen Heating and Air 919-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Drive, Garner, NC 27529 stephensonservice@hotmail.com
Address Email Address
18644
License # _____

Plumbing Contractor Information

Description of Work Plumb new house # Baths 2
Wagner Plumbing 919-228-1532
Plumbing Contractor's Company Name Telephone
555 Tirzah Drive, Lillington, NC 27546 wagnerplumbingco@yahoo.com
Address Email Address
31576
License # _____

Insulation Contractor Information

Tatum Insulation Inc. 519 Old Drug Store Rd. 919-661-0999
Insulation Contractor's Company Name & Address Telephone
Garner, NC 27529

***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.

D. A. Roy

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

3-3-2022

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:

D. A. Roy - owner

Date:

3-3-2022