

Application #

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work.
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: NVR INC DBA RYAN HOMES	Date: 3/10/22
	Phone: 919-987-1970
Site Address: 314 HUNTING WOOD DRIVE	
Subdivision: QUAIL GLEN	Lot: 155
Description of Proposed Work: NEW SINGLE FAMILY	Total Job Cost: \$150,556
General Contractor Informatio	<u>n</u>
NVR INC DBA RYAN HOMES	919-987-1930
Building Contractor's Company Name	Telephone
5734 TRINITY ROAD, SUITE 200	msweitze@nvrinc.com
Address	Email Address
42783 HEATED SQ FT 1903 GARAGE S	_{Q FT} 397
License #	
Description of Work ALL ELECTRICAL WORK Service Size:	<u>on</u> Amps T-Pole: X Yes No
ABSOLUTE POWER COMPANY	919-827-3802
Electrical Contractor's Company Name	Telephone
5448 APEX PEAKWAY #301, APEX NC 27502	·
Address	mhowington@absolutepowercompany.com Email Address
10980-U	Email Address
License #	
Mechanical/HVAC Contractor Information	<u>nation</u>
Description of Work ALL MECHANICAL WORK	
MAYNOR HEATING AND AIR INC.	919-361-0993
Mechanical Contractor's Company Name	Telephone
1000 GOODWORTH DRIVE, APEX NC 27539	brittany@maynorhvac.com
Address	Email Address
12309	
License #	
Plumbing Contractor Information	
Description of Work ALL PLUMBING WORK	
ALL AMERICAN PLUMBING	910-897-3001
Plumbing Contractor's Company Name	Telephone
157 E. LEMON STREET, COATS, NC 27521	javery@aapcoinc.net
Address	Email Address
23263	
License #	
Insulation Contractor Information	
BUILDERS INSULATION, 9521 LUMLEY RD. SUITE 200, MORRISVILLE NC 27560	984-242-5731
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.

Wjsweitzer Signature of Owner/Contractor/Officer(s) of Corporation 3/10/22 Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14	
The undersigned applicant being the:	
General Contractor Owner X_ 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:	
X 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: Mjsweitzer	