

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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

Application for Residential Building and Trades Permit

Owner's Name: Jaime Investments INC.	Date <u>03-21-2</u> 02
Site Address: 48 Ridge Haven Drive So	inford Phone
Subdivision: Carolina Hills	Lot
Description of Proposed Work: Single Family Home	Total Job Cost 160,000
General Contractor Information	
Godon Construction	919-770-1070
Building Contractor's Company Name	Telephone
	godon construction &
Address	Email Address gmail.com
License # HEATED SQ FT 560 GARAGE SQ	FI
Floatrical Contractor Information	
Description of Work New Electrical Service Size:	
Collins Heating Air, and electrical	919-498-4830 Telephone
Electrical Contractor's Company Name 9490 00 421 Broadway N C	relephone
9490 old 421 Broadway N.C.	Email Address
172771	
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work New mechanical HVAC	1100 1100
Collins Heating Air and electrical	919-498-4830 Telephone
Mechanical Contractor's Company Name 9490 Old 421 Broadway N.C.	relephone
9490 old 421 Broadway N.C.	Email Address
8276 nc	
License #	
Plumbing Contractor Information	
Description of Work New Plumbing	# Baths
Titan's Dlumbing	919 - 902 - 0990
Plumbing Contractor's Company Name P.O. Box 1045 Dunn N.C.	Telephone
Address	Email Address
34800	
License #	
Insulation Contractor Information	
Move 105 Construction INC.	3 2 2022 Telephone
Insulation Contractor's Company Name & Address 2512 Watson All Sanford	919-478-3408
and walled the contract	710-0400



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.

03/21 12022

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: 03/21/203	