



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: MARTIN J GALARDI Date 3/31/22
Site Address: Lot E JACKSON ST Phone 919-427-8314
Subdivision: EXEMPT SUBDIVISION Lot 2
Description of Proposed Work: NEW DWELLING Total Job Cost 215 K

General Contractor Information

T.C. PROPERTY SOLUTIONS, INC 919-427-8314
Building Contractor's Company Name Telephone
140 MUMFIELD DR YOUNGSVILLE NC 27596 POINTING @ AOL.COM
Address Email Address
75566 HEATED SQ FT 1060 GARAGE SQ FT 0-
License #

Electrical Contractor Information

Description of Work NEW CONSTRUCTION Service Size: 200 Amps T-Pole: Yes No
ROBERTO ELECTRICAL COMP LLC 919-730-6430
Electrical Contractor's Company Name Telephone
4281 MICHAEL ALAN CT GRAHAM NC 27253
Address Email Address
33160
License #

Mechanical/HVAC Contractor Information

Description of Work NEW CONSTRUCTION
SERVICES UNLIMITED HEAT + AIR 919-875-2114
Mechanical Contractor's Company Name Telephone
1241 WICKER DR RALEIGH
Address Email Address
14651
License #

Plumbing Contractor Information

Description of Work NEW CONSTRUCTION # Baths 2
CUSTOM + MASTER PLUMBING 919-796-9423
Plumbing Contractor's Company Name Telephone
721 S. NEW HOPE RD STE 102 RALEIGH NC
Address Email Address
21583
License #

Insulation Contractor Information

TRI-CITY INSULATION 919-817-0091
Insulation Contractor's Company Name & Address Telephone



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.

Maurice J. Galardi
Signature of Owner/Contractor/Officer(s) of Corporation

3/31/22
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: Maurice J Galardi President Date: 3/31/22