

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 or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Triple A Homes, Inc.	Date: <u>4/6/22</u>
Site Address: 52 Royal Ella Court Fuquay-Varina, NC 27523	Phone: <u>984-225-0699</u>
Subdivision: Prince Place	Lot: ¹⁴
Description of Proposed Work:	Total Job Cost:\$350,000
General Contractor Inform	ation
Triple A Homes, Inc.	984-225-0699
Building Contractor's Company Name	Telephone
PO Box 1117, Holly Springs, NC 27540	logan@tripleahomes.org
Address	Email Address
76983	
License #	
Electrical Contractor Inform Description of Work Turnkey Electrical Service Service Service	<u>nation</u> Size: <u>200 </u> Amps T-Pole: <u>χ </u> Yes <u> </u> No
Imperial Electric	919-363-7474
Electrical Contractor's Company Name	Telephone
PO Box 1626, Apex, NC 27502	office@imperial-electricnc.com
Address	Email Address
19850-L	
License #	
Mechanical/HVAC Contractor Ir	nformation
Description of Work Turnkey HVAC Services	
Maynor HVAC	919-361-0993
Mechanical Contractor's Company Name	Telephone
1094 Classic Rd, Apex, NC 27539	holli@maynorhvac.com
Address	Email Address
35159	
License # Plumbing Contractor Inform	mation
Description of Work Turnkey Plumbing Services Carnells Plumbing Inc	# Baths4 919-365-6944
Plumbing Contractor's Company Name	Telephone
611 Maggie Way, Zebulon, NC 27591	abcarnellplbg@bellsouth.net
Address	Email Address
11755	
License #	
Insulation Contractor Inform	<u>mation</u>
Jimmy Stevens	919-937-8543
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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

MINAN

4/6/22

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

Date

The ur	Affidavit for ndersigned applicant being the:		Comp	pensation N.C.	G.S. 87-14	
	_ General Contractor	Owner)	x	Officer/Agent of th	e Contractor or Owner	
	eby confirm under penalties of the in the permit:	perjury that	the pers	son(s), firm(s) or co	rporation(s) performing the work	
<u>x</u>	Has three (3) or more employe	es and has o	obtained	l workers' compen	sation insurance to cover them.	
them.	Has one (1) or more subcontra	ctors(s) and	has ob	ained workers' cor	npensation insurance to cover	
	Has one (1) or more subcontrang themselves.	ctors(s) who	o has the	eir own policy of wo	orkers' compensation insurance	
	Has no more than two (2) emp	loyees and r	no subco	ontractors.		
Depart to issu	working on the project for which ment issuing the permit may re ance of the permit and at any ti g out the work.	quire certific	ates of	coverage of worke	r's compensation insurance prior	
Sian w	Title: (lun Peter	8	Permitti	ng Specialist	Date: 4/6/22	