



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: Jaime Investments INC Date: 05/20/2022  
Site Address: Pine Haven Dr Sanford NC Phone: 919 4783428  
Subdivision: Carolina Hills Lot: \_\_\_\_\_  
Description of Proposed Work: New Single Family Home Total Job Cost: 148000

**General Contractor Information**

Godon Construction Telephone \_\_\_\_\_  
Building Contractor's Company Name  
323 N. Steele St. Sanford NC Email Address \_\_\_\_\_  
Address  
46172 HEATED SQ FT \_\_\_\_\_ GARAGE SQ FT \_\_\_\_\_  
License #

**Electrical Contractor Information**

Description of Work New Electrical Service Size: 900 Amps T-Pole:  Yes  No  
Collins Heating and Air and Electrical Telephone 919 498-4830  
Electrical Contractor's Company Name  
9490 Old 421 Broadway NC Email Address \_\_\_\_\_  
Address  
17277L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Mechanical / HVAC  
Collins Heating and Air and Electrical Telephone 919 498-4830  
Mechanical Contractor's Company Name  
9490 Old 421 Broadway NC Email Address \_\_\_\_\_  
Address  
8276 NC  
License #

**Plumbing Contractor Information**

Description of Work New Plumbing # Baths 2  
Titan's Plumbing LLC Telephone (919) 902-0990  
Plumbing Contractor's Company Name  
PO Box 1045 Dunn NC Email Address \_\_\_\_\_  
Address  
34800  
License #

**Insulation Contractor Information**

Morelos Construction INC Telephone 919 4783428  
Insulation Contractor's Company Name & Address

**\*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.

David Perez Jaime  
Signature of Owner/Contractor/Officer(s) of Corporation

05/20/2022  
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: David Perez Jaime Jaime Investments Date: 05/20/2022  
INC