



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: Kara Homes, Inc. Date 2/19/2024
Site Address: 414 Lambert Ln Phone 919-390-9117
Subdivision: Purfoy Place Lot 18
Description of Proposed Work: New Single Family Dwelling Total Job Cost \$490,000

General Contractor Information

Kara Homes, Inc. 919-390-9117
Building Contractor's Company Name Telephone
1001 Procure St. Suite 101 Fuquay Varina, NC 27526 chris@karahomesinc.com
Address Email Address
59615 **HEATED SQ FT 3,093** **GARAGE SQ FT 878**
License #

Electrical Contractor Information

Description of Work New Residential Install Service Size: 200 Amps T-Pole: X Yes ___ No
Lights Unlimited, Inc. 919-779-6838
Electrical Contractor's Company Name Telephone
310 McCormick St. Garner, NC 27529 andrew.craven@ymail.com
Address Email Address
SP.SFD.36240
License #

Mechanical/HVAC Contractor Information

Description of Work New Residential Install
Stephenson Heating and Air Conditioning, Inc. / Charles Anthony Stephenson 919-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr. Garner, NC 27529 stephensonhvac@aol.com
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work New Residential Install # Baths 3
Sweetwater Plumbing, LLC 919-418-4565
Plumbing Contractor's Company Name Telephone
3460 Apex Peakway Apex, NC 27502 tom@sweetwaterplumbingllc.com
Address Email Address
23793
License #

Insulation Contractor Information

Tatum Insulation II 519 Old Drugstore Rd. Garner, NC 27529 919-661-0999
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.

Richard Beland - General Contractor 2/19/2024
Signature of Owner/Contractor/Officer(s) of Corporation 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: Richard Beland - General Contractor Date: 2/19/2024