



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: Garman Homes Date 8/29/22  
Site Address: 214 Retreat Dr Phone 919-830-5309  
Subdivision: Serenity Lot 95  
Description of Proposed Work: New Construction of SFD Total Job Cost 325,000

**General Contractor Information**

Garman Homes 919-830-5309  
Building Contractor's Company Name Telephone  
2051 Renaissance Park Place #200. Cary, NC 27513 lindseyg@garmanhomes.com  
Address Email Address  
62939 **HEATED SQ FT** 2034 **GARAGE SQ FT** 428  
License #

**Electrical Contractor Information**

Description of Work All Electrical Work Service Size: 200 Amps T-Pole:  Yes  No  
Ogilvie Electric 919-622-2148  
Electrical Contractor's Company Name Telephone  
5325 Hidwell Pl Apex, NC 27539 scheduling.ogilvieelectric@gmail.com  
Address Email Address  
17046  
License #

**Mechanical/HVAC Contractor Information**

Description of Work All Mechanical Work  
JW Ultra Air 919-348-9399  
Mechanical Contractor's Company Name Telephone  
3200 Lake Woodard Dr Raleigh, 27604 ultra.wlong@gmail.com  
Address Email Address  
18881  
License #

**Plumbing Contractor Information**

Description of Work All Plumbing Work # Baths 2.5  
Titan's Plumbing 919-615-1947  
Plumbing Contractor's Company Name Telephone  
PO Box 1045 Dunn, 28335 business@titansplumbing.com  
Address Email Address  
34800  
License #

**Insulation Contractor Information**

Live Green, Inc. 5001 Old Poole Rd Raleigh, 27610 919-453-6411  
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.**

*Sheso* **for Garman Homes**  
Signature of Owner/Contractor/Officer(s) of Corporation

8/29/22  
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: *Sheso* **Starts Coordinator for Garman Homes** Date: 8/29/22