



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: Dia Sanders Date 10/3/22
Site Address: 1873 Old Stage Rd S Phone 910-336-3415
Subdivision: N/A Lot N/A
Description of Proposed Work: Construction of new sfd Total Job Cost \$ 292,000

General Contractor Information

Red Door Homes 919-980-0003
Building Contractor's Company Name Telephone
12809 US Hwy 70 Bus, West Clayton, NC, 27520 Kallie@reddoorhomesnc.com
Address Email Address
79810 **HEATED SQ FT** 1848 **SARAGE SQ FT** 457
License #

Electrical Contractor Information

Description of Work Construction of new sfd - install electrical Service Size: 200 Amps T-Pole: Yes No
Turn 2 Electric 919-443-9094
Electrical Contractor's Company Name Telephone
218 Lopez Lane Clayton, NC, 27527 brandon@turn2electrical.com
Address Email Address
34860
License #

Mechanical/HVAC Contractor Information

Description of Work Install Mechanical in sfd
Mebane Air 919-563-2093
Mechanical Contractor's Company Name Telephone
718 Mattress Factory Rd, Mebane, NC, 27302 Mebaneair@outlook.com
Address Email Address
20391
License #

Plumbing Contractor Information

Description of Work Install plumbing in sfd # Baths 2
Tom Bacon Plumbing 919-732-7130
Plumbing Contractor's Company Name Telephone
P.O. Box 40 Hillsborough, NC, 27278 T3plumbinginc@aol.com
Address Email Address
21677
License #

Insulation Contractor Information

31-W Insulation 351 Hein Dr. Garner, NC, 27529 919-500-3650
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.

Kallio Taylor

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

10/3/22

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: *Kallio Taylor - Permitting coordinator*

Date: *10/3/22*