

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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

Application for Residential Building and Trades Permit

Owner's Name: On Top Building Company, LLC	Date <u>10-3-2022</u>
Site Address: 1213 Denning Road, Angier NC 27501	Phone 919.201.1133
Subdivision: N/A	Lot
Description of Proposed Work: New Residential Dwelling	Total Job Cost <u>4 250,000.00</u>
General Contractor Informati	on
On Top Building Company, LLC Building Contractor's Company Name	919.201.1133 Telephone
2393 Twin acres Rd., Clayton NC 27520 Address	<u>brandier ealtor e gmail. com</u> Email Address
71416 HEATED SQ FT 1608 GARAGE	SQ FT_484_
License # Electrical Contractor Information	tion
Description of Work New Residential Constr. Service Size	e: <u>200</u> Amps T-Pole: <u>V</u> YesNo
R.a. Jackson Electric Electrical Contractor's Company Name	919 894 5367 Telephone
9261 Raleigh Rd., Benson NC 27504 Address	<u>rajackson electric c embarg m</u> ail. con Email Address
21144 License # Mechanical/HVAC Contractor Info	ormation
Description of Work New Residential Construction	
a - 20 a m . 그리고 하다 15 대는 그리고 15 대는 15 대	919. 329.0686
Stephenson Heating and Qui Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr., Garner NC 27529 Address	stephenson hvac@ aol. com Email Address
18644 License # Plumbing Contractor Informa	ation
	# Baths 2.5
Description of Work New Residential Construction	919.496.6929
White's Plumbing Plumbing Contractor's Company Name	Telephone
P.O. Box 1286, youngsville NC 27596 Address	whitesplumbing 16@gmail.com Email Address
[694] License #	
Insulation Contractor Information	
Tatum Insulation, 519 Old Drug Stove Rd., Garner Insulation Contractor's Company Name & Address	NC <u>919.661.0999</u> 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.

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

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: Blandie H. Rehetton Date: 10.3.2022	