

Application # _____

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

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: 1191 Denning Rd., Angier NC 27501	Phone <u>919.201.1133</u>
Subdivision: N/A	LOI _3
Description of Proposed Work: New Residential Dwelling	Total Job Cost <u>\$250, 000.00</u>
General Contractor Information	
Homes By Michael Ford, LLC	919. 553 · 1055 Telephone
Building Contractor's Company Name	michael@homesbyford.com
P.O. Box 9, Clayton NC 27528	Email Address
Address HEATED SQ FT GARAGE SQ	FT
License #	
Description of Work New Residential Constr. Service Size: 2	200 Amps T-Pole: VYes No
	919.894.5367
R.Q. Jackson Electric Electrical Contractor's Company Name	Telephone
9261 Roleigh Rd., Benson NC 27504 Address	rajackson electric e embargmail.com Email Address
21144	
License # Mechanical/HVAC Contractor Information	ation
Description of Work New Residential Constr.	919.329.0686
Stephenson Heating & Oir Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr., Garner NC 27529 Address	Stephenson hvac @ aol.com Email Address
18644	
License # Plumbing Contractor Information	1
Description of Work New Residential Constr.	# Baths
White's Plumbing	919.496.6929
Plumbing Contractor's Company Name	Telephone
P.O. Box 1286, Youngsville NC 27596 Address	whitesolumbing 16@ gmail.com Email Address
16941	
License # Insulation Contractor Information	o <u>n</u>
	919.661.0999
Tatum Insulation, 519 Old Drug Store Rd., Garner NC 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.

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

10.3.2022

Δffidavit	for Worker's C	Compensation N.C.G.S. 87-14
The undersigned applicant being		•
✓ General Contractor _	Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penaltic set forth in the permit:	es of perjury that th	e person(s), firm(s) or corporation(s) performing the work
	ployees and has ob	otained workers' compensation insurance to cover them.
		as obtained workers' compensation insurance to cover
Has one (1) or more subcovering themselves.	ontractors(s) who l	nas their own policy of workers' compensation insurance
Has no more than two (2)	employees and no	subcontractors.
		s sought it is understood that the Central Permitting ates of coverage of worker's compensation insurance prior e permitted work from any person, firm or corporation
Sign w/Title:	b; owner	Date: 10.3.2022