



Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application # _____

* Each section below to be filled out by whomever performing work. 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: Land 2020 Date: 10-5-22
Site Address: 10472 NC 27 W. Lillington NC 27546 Phone: 919-524-3354
Subdivision: Males Farm Lot: 1
Description of Proposed Work: New construction Total Job Cost: 235,000

General Contractor Information

Southern Touch Homes, LLC. 919-524-3354
Building Contractor's Company Name Telephone
P.O. Box 2135 Angier, NC 27501
Address southerntouchhomesllc@gmail.com
78270 Email Address
License # HEATED SQ FT 1328 GARAGE SQ FT 398

Electrical Contractor Information

Description of Work Install electrical Service Size: _____ Amps T-Pole: Yes No
Sno Electric
Electrical Contractor's Company Name Telephone 919-427-6952
19655 NC Hwy 210 Angier, NC 27501
Address
13075 Email Address
License #

Mechanical/HVAC Contractor Information

Description of Work Install HVAC unit
Mainstream Mechanical HVAC Telephone 919-934-9339
Mechanical Contractor's Company Name
412 Lazy Branch Drive Benson, NC 27504
Address mainstreammechanical@gmail.com
31005 Email Address
License #

Plumbing Contractor Information

Description of Work Install Plumbing # Baths 2 1/2
Double J Plumbing Telephone 910-814-7705
Plumbing Contractor's Company Name
614 Byrd Pond Road Bunnlevel, NC 28323
Address jamiejohnsonplumbing@gmail.com
21649 Email Address
License #

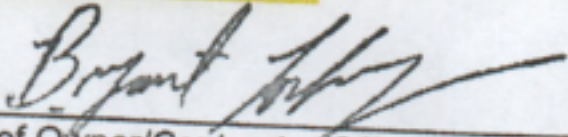
Insulation Contractor Information

Tri City Insulation 334 East Mtn. Dr. Fayetteville, NC 28306 Telephone 910-486-8855
Insulation Contractor's Company Name & Address

***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

10-5-22
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:

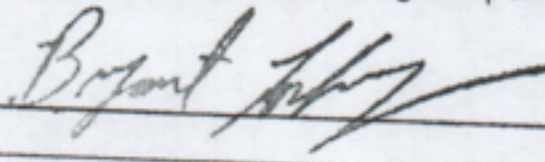
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  owner Date: 10-5-22