



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: Carla & Darron Murray Date 10/11/22

Site Address: 59 Brandon Dr., Lillington, NC 27546 Phone 240-825-9934

Subdivision: Keith Hills Lot #15

Description of Proposed Work: SFD, 4 Bed, 2.5 Bath, Crawl space, garage, deck Total Job Cost ~ \$500,000.00

General Contractor Information

Caruso Homes On Your Lot NC 1, LLC 240-825-9830
Building Contractor's Company Name Telephone

110 Horizon Drive, Suite 320, Raleigh, NC 27615 ncoylpermits@carusohomes.com
Address Email Address

84268 **HEATED SQ FT** 3560 **GARAGE SQ FT** 453
License #

Electrical Contractor Information

Description of Work Electrical & wiring for SFD Service Size: 200 Amps T-Pole: X Yes ___ No
MSF Electric 919-217-9767

Electrical Contractor's Company Name Telephone
7513 Kinghtdale Blvd, Knightdale, NC 27545 mandyk@msfelectric.com
Address Email Address

U34688-02
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC installation for SFD 919-875-2114
Services Unlimited Heating & Air Telephone

1241 Wicker Dr, Raleigh, NC 27604 clint@surhvac.com
Address Email Address

14651
License #

Plumbing Contractor Information

Description of Work Plumbing installation for SFD # Baths 2.5 919-542-2755
Plumbing & Mechanical Corporation of NC Telephone

Plumbing Contractor's Company Name Telephone
98 Broadleaf Court, Chapel Hill, NC 27517 tim@pmcofnc.com
Address Email Address

22186
License #

Insulation Contractor Information

Tri-city Insulation 919-790-9684
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.

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

10/11/22
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: *Chk Ask, Division Manager* Date: ~~10/11/22~~ 10/11/22

Causes Homes On Yr Lot NC1, LLC