



Application # _____

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

* 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: Red Rock Builders LLC Date: _____
Site Address: _____ Phone: 919-612-1377
Subdivision: Anderson Creek Lot: _____
Description of Proposed Work: Single Family Dwelling Total Job Cost: _____

General Contractor Information

Red Rock Builders LLC Telephone: 919-612-1377
Building Contractor's Company Name
1303 Olde Walker Mill Rd Apex NC 27502
Address Email Address: redrockknc@gmail.com
80602 HEATED SQ FT GARAGE SQ FT

Electrical Contractor Information

Description of Work: Electrical Service Size: 200 Amps T-Pole: Yes No
Kmc Electric LLC Telephone: 919-559-5172
Electrical Contractor's Company Name
3909 Buffalo Rd Raleigh NC 27604
Address Email Address: Kmc electricllc@gmail.com
SPSE035407
License #

Mechanical/HVAC Contractor Information

Description of Work: HVAC/GAS
Beard Brothers LLC Telephone: 910-975-7535
Mechanical Contractor's Company Name
633 Foxlair Dr Fayetteville NC 28311
Address Email Address: beardbrothers247@gmail.com
35204 class1
License #

Plumbing Contractor Information

Description of Work: Plumbing # Baths: 3 1/2
Hare Plumbing Inc Telephone: 919-770-5308
Plumbing Contractor's Company Name
402 Swearingen Ln Sanford NC 27332
Address Email Address: deweyrichard@yahoo.com
19443
License #

Insulation Contractor Information

Greenville Foam Insulation Telephone: 919-671-4325
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.

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

12-14-22
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: Buck Woodrow managing partner Date: 12-15-22