

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 or licensed contractor. Address, company name & phone must match information on license.

<u>Application for Residential Building and Trades Permit</u>

Owner's Name: John & Kathleen Glover	Date: 6/9/23
Site Address: 494 Grameta Ln, Lillington, NC 27546	Phone: 910-890-9400
Subdivision: TR#2, Loretta O OQuinn Estate	Lot: Tract 2
Description of Proposed Work: Construction of new single family	home Total Job Cost: \$390,000.00
General Contractor Inform	
America's Home Place, Inc	910-252-0076
Building Contractor's Company Name	Telephone
3266 Sanderosa Road, Fayetteville, NC 28312	tbernard@americashomeplace.com
Address	Email Address
84626	
License #	
Electrical Contractor Information of Marie New home Floridae System Installation Contractor Information Contractor	nation V
Description of Work New home Electrical System Installation Service SIES Residential Inc.	
	713-657-9666
Electrical Contractor's Company Name 111 Sigma Drive, Garner, NC 27529	Telephone
Address	lance.langley@ies-co.com
U.27096-02	Email Address
License #	
Mechanical/HVAC Contractor In	dormation
Description of Work New home HVAC System and ventiltion in	
Certified Heating & Air	910-858-1129
Mechanical Contractor's Company Name	Telephone
207 W. David Parnell St, Parkton, NC 28371	ehrin.certified@gmail.com
Address	Email Address
L.20012	
License #	and an
Plumbing Contractor Inform	
Description of Work New home plumbing, fixture, appliance Inst	
Titan's Plumbing LLC	919-615-8779
Plumbing Contractor's Company Name	Telephone
PO Box 1045, Dunn, NC 28335	business@titansplumbing.com
Address	Email Address
L.34800	
License #	
Insulation Contractor Inform	
Insulating, Inc. 5902 Fayetteville Road, Raleigh NC 2760	
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

6/9/23

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: Thomas M Buna Q GENERAL MANAGER Date: 6/9/23	