

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

## Application for Residential Building and Trades Permit

Owner's Name:Dove Homes, LLC	Date
Site Address: Lot 1 Delma Grimes Road, Coats	Phone 919-427-6991
Subdivision: Mary Ellen Johnson Lauder	Lot1
Description of Proposed Work: New Residential Construction	Total Job Cost 4/74, 150
General Contractor Information	<del></del>
Dove Homes, LLC	919-427-6991
Building Contractor's Company Name	Telephone
8626 Macedonia Lake Drive	jdove@dove-homes.com
Address	Email Address
50469 HEATED SQ FT 1935 GARAGE SQ	FT 381
License #	
Description of Work New Residential Construction Service Size:	200 Amps T-Pole: X Yes No
Electrical Innovators	919-279-7177
Electrical Contractor's Company Name	Telephone
1802 NC 27 East, Lillington, NC 27539	electricbiz@hotmail.com
Address	Email Address
L.29238	
License #	-4i
Mechanical/HVAC Contractor Information of Work  New Residential Construction	ation
Decemporary Trans	
Maynor HVAC	919-361-0993
Mechanical Contractor's Company Name 1000 Goodworth Drive, Apex, NC 27539	Telephone
Address	gerald@maynorhvac.com Email Address
L.12309	Email Address
License #	
Plumbing Contractor Information	<u>1</u>
Description of Work New Residential Construction	# Baths 3
Evans Plumbing Inc.	919-772-9133
Plumbing Contractor's Company Name	Telephone
102 Sigma Drive, Garner, NC 27529	service@evansplumbinginc.com
Address	Email Address
L.07035	
License #	_
Insulation Contractor Information Tatum Insulation II 519 Old Drug Store Road, Garner, NC 27529	
Insulation Contractor's Company Name & Address	919-661-0999 Telephone
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\*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

3-13-2023

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:	