



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: Heiner Nunez and Ondina Nunez Date _____
Site Address: Bethel Church Rd Angier 27521 Phone 919 356 0996
Subdivision: _____ Lot _____
Description of Proposed Work: Single Family Dwelling Total Job Cost 180,000

General Contractor Information

Heiner nunez 919-356-0996
Building Contractor's Company Name Telephone
1012 Emsleigh way Fuquay Varina NC ondinaneconunez@gmail.com
Address Email Address

HEATED SQ FT 1248 **GARAGE SQ FT** _____

License # _____

Electrical Contractor Information

Description of Work _____ Service Size: _____ Amps T-Pole: Yes No
Electrical Innovators 919-279-7177
Electrical Contractor's Company Name Telephone
1802 NC 27E Lillington, NC 27546 electricbiz@hotmail.com
Address Email Address

L.29238

License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Sampson Service, LLC 919-255-8866
Mechanical Contractor's Company Name Telephone
179 Donmor Court Garner NC 27529 traci@gmservicehvac.com
Address Email Address

28557

License # _____

Plumbing Contractor Information

Description of Work _____ # Baths 2
On Demand Plumbing 919 632-7536
Plumbing Contractor's Company Name Telephone
1829 Hockaday Road Four Oaks NC 27524 heeractioflores741@gmail.com
Address Email Address

L.33457

License # _____

Insulation Contractor Information

Heiner Nunez 919-356-0996
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.

Hemer nunez
Signature of Owner/Contractor/Officer(s) of Corporation

3/21/23
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: Hemer nunez Date: 3/21/23