

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: JONATHAN WALL Date 4/27/23
 Site Address: 462 EAST STEWART STREET Phone 919-669-8060
 Subdivision: - Lot PRIVATE LOT
 Description of Proposed Work: NEW HOME Total Job Cost 180,000

General Contractor Information

JONATHAN WALL 919-669-8060
 Building Contractor's Company Name Telephone
1269 TURNER MEADOW DRIVE, RALEIGH JONATHANWALLHOMES@gmail.com
 Address Email Address
35492 HEATED SQ FT 1192 GARAGE SQ FT 0
 License # _____

Electrical Contractor Information

Description of Work NEW HOME Service Size: 200 Amps T-Pole: Yes No
FENG ELECTRICAL, LLC 406-581-5464
 Electrical Contractor's Company Name Telephone
502 NORMANCREST CT. CARY _____
 Address Email Address
L-34986 _____
 License # _____

Mechanical/HVAC Contractor Information

Description of Work NEW HOME
BEBLEY HVAC 919-868-5821
 Mechanical Contractor's Company Name Telephone
58 W.C. BEBLEY DR. BOYSON _____
 Address Email Address
9290 _____
 License # _____

Plumbing Contractor Information

Description of Work NEW HOME # Baths 2
~~ARTHUR'S PLUMBING~~ H3H Plumbing 919-820-2613
 Plumbing Contractor's Company Name Telephone
2409 SIMPER CHURCH RD, FOUR OAKS EVANHARGREVE57@yahoo.com
 Address Email Address
36339 _____
 License # _____

Insulation Contractor Information

FRIENDS INSULATION 919-291-2438
 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

Date

4/27/23

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:

 PRESIDENT

Date:

4/27/23