



Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.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: David Heath Date: 4/19/23

Site Address: 281 Old Stage Rd N, Coats Phone: 919-753-5004

Subdivision: n/a Lot: _____

Description of Proposed Work: Personal Single Family Home Total Job Cost: 203,000

General Contractor Information

Ronald Mooneyham
Building Contractor's Company Name

919-422-0097
Telephone

319 Fox Hollow Dr., Clayton NC
Address

RCMBuilders@hotmail.com
Email Address

49473
License #

HEATED SQ FT 1600 **GARAGE SQ FT** n/a

Electrical Contractor Information

Description of Work Install Service Size: 200 Amps T-Pole: Yes No

RA Jackson Electric
Electrical Contractor's Company Name

919-730-1251
Telephone

9261 Raleigh Rd, Benson NC 27504
Address

RAJacksonElectric@embarq.com
Email Address

21144
License #

Mechanical/HVAC Contractor Information

Description of Work Install

Dupree Heating & Air
Mechanical Contractor's Company Name

919-291-0573
Telephone

2085 Eddie Howard Rd, Willow Spring
Address

DupreeHVAC@yahoo.com
Email Address

31834
License #

Plumbing Contractor Information

Description of Work Install # Baths 2

Gordans Plumbing Inc.
Plumbing Contractor's Company Name

Telephone

3849 Little Creek Church Rd, Clayton, NC
Address

GordonSPlumbing910@gmail.com
Email Address

19346
License #

Insulation Contractor Information

Tatum Insulation II Inc
Insulation Contractor's Company Name & Address

919-661-0999
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]
Signature of Owner/Contractor/Officer(s) of Corporation

4/19/23
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: [Signature] David Heist / owner Date: 4/19/23