



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

4/21/23

Owner's Name: Seven Magnolias Construction Date: 4/21/23

Site Address: 649 S. Lincoln St, Coats, NC Phone: 919-868-9385

Subdivision: NA Lot: 5B

Description of Proposed Work: Residential Home Total Job Cost: 175,000

General Contractor Information

Seven Magnolias Construction 919-868-9385
Building Contractor's Company Name Telephone

14288 NC 210 Angier, NC 27501 SNORDANE7MAGNOLIAS.COM
Address Email Address

80443 HEATED BS FT 1360 GARAGE BS FT 0
License #

Electrical Contractor Information

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

C+M Electric 919-772-4518
Electrical Contractor's Company Name Telephone

8305 Cleveland Rd - Clayton SHANE@CANDMELECTRIC.COM
Address Email Address

05689
License #

Mechanical/HVAC Contractor Information

Description of Work New Home Telephone 919-329-0686
Stephenson Htg + Air

Mechanical Contractor's Company Name Telephone
343 Shipwash Dr - Garner stephenhvac@aol.com

Address Email Address
18644

License #

Plumbing Contractor Information

Description of Work New home # Baths 2
Ambit Plumbing Telephone 919-934-1379

Plumbing Contractor's Company Name Telephone
755 Rock Pillar Rd - Clayton CONTACT AMBIT@ambitplumbingmail.com

Address Email Address
20823

License #

Insulation Contractor Information

Cruz 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.

Steve Paul

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

7-21-23

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: *Steve Paul - owner*

Date: 7-21-23