



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: T+T Boys, Inc. Date 5/17/23
Site Address: 811 S 12th St Erwin 28339 Phone 919.333.3499
Subdivision: N/A Lot _____
Description of Proposed Work: Single Family Home Total Job Cost: \$150,000

General Contractor Information

BVA Enterprise, Inc. Telephone 919.520.2181
Building Contractor's Company Name
1300 Benon Rd St 110 Garner NC 27529 Email Address aford@vfyreality.com
Address
79542 HEATED SQ.FT 1064 GARAGE SQ.FT 0
License #

Electrical Contractor Information

Description of Work _____ Service Size: _____ Amps T-Pole: Yes No
Jeff Willis Electric, Inc. Telephone 919 422 4914
Electrical Contractor's Company Name
120 Hunting Lodge Rd Clayton NC 27520 Email Address _____
Address
15644
License #

Mechanical/HVAC Contractor Information

Description of Work _____ Telephone 919 902 0030
Air Temp Mechanical Telephone
Mechanical Contractor's Company Name
73 Laughter Ln Garner 27529 Email Address _____
Address
21362
License #

Plumbing Contractor Information

Description of Work _____ # Baths 2
Integral Plumbing Telephone 919 622 9102
Plumbing Contractor's Company Name
3805 Hux Semint Tr Zebulen 27597 Email Address _____
Address
31279
License #

Insulation Contractor Information

TNT Insulation LLC Telephone 919 553 9888
Insulation Contractor's Company Name & Address Unit 12
Clayton 27520

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

strong roots • new growth



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

5/17/23
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.

AF Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

AF Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

AF 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 B Ford Officer of Owner + GC Date: 5/17/23