



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: William D + Katherine M Allgood Date 5-25-2023
Site Address: 189 Spence Road Phone 919-422-5941
Subdivision: _____ Lot A
Description of Proposed Work: Build New House Total Job Cost 500,000.-

General Contractor Information

Davidson Home Crafters, Inc 919-422-5941
Building Contractor's Company Name Telephone
5501 Epivale Ct Holly Springs, NC 27540 dauid@davidsonhomecrafters.com
Address Email Address
055627 **HEATED SQ FT 2103 GARAGE SQ FT 499**
License #

Electrical Contractor Information

Description of Work NEW Service Size: 200 Amps T-Pole: Yes No
B P Electric
Electrical Contractor's Company Name Telephone 919-858-9097
7726 Chapel Hill Rd Raleigh, NC 27607 B800@BellSouth.net
Address Email Address
22661-SP-SFD
License #

Mechanical/HVAC Contractor Information

Description of Work NEW
Stephenson's Heating + Air 919-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Dr Gaener, NC 27529 Stephensonhvac@aol.com
Address Email Address
18644 H3-1
License #

Plumbing Contractor Information

Description of Work NEW # Baths 3
Camden's Plumbing + Repair 919-557-1584
Plumbing Contractor's Company Name Telephone
P.O. Box 1359 F-V, NC 27526 CamdenSplumbing@aol.com
Address Email Address
18903
License #

Insulation Contractor Information

TriCity Insulation 919-790-9684
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

5-25-2023
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:

 President

Date: 5-25-23