



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: Ken & Sharon Gallup Date 6/7/2023
Site Address: 10894 Vic Keith Rd Phone _____
Subdivision: Buffalo Lake Lot C2
Description of Proposed Work: New Construction Total Job Cost 334,000

General Contractor Information

DEL Builders Inc 919-777-4610
Building Contractor's Company Name Telephone
PO Box 994 Sanford NC 27331 david@sandspr.us
Address Email Address
77556 HEATED SQ FT 1135 GARAGE SQ FT N/A
License #

Electrical Contractor Information

Description of Work New Construction Service Size: 100 Amps T-Pole: Yes No
T & G Electric of Sanford 919-434-4480
Electrical Contractor's Company Name Telephone
5303 Broadway Rd Sanford NC 27332 tim.gautier@windstream.net
Address Email Address
L15697
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Center HVAC 919-775-2500
Mechanical Contractor's Company Name Telephone
511 E. Marn St. Sanford NC 27332 mike@centerheat.com
Address Email Address
4627
License #

Plumbing Contractor Information

Description of Work NEW Construction # Baths 2
Ricky Simpson Plumbing 910-690-3831
Plumbing Contractor's Company Name Telephone
212 Sarason Place Vass NC 28394 rsgoldwing99@gmail.com
Address Email Address
20261
License #

Insulation Contractor Information

Insulation Inc 1527 Jefferson Pavis 919-776-4138
Insulation Contractor's Company Name & Address Telephone
Sanford NC 27330

***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.

[Handwritten Signature]

6/7/2023

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

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: *[Handwritten Signature]* (president)

Date: *6/7/2023*