

* 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. Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

www.namett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Bryant Lockamy	
	Date: 6-13
Subdivision: NEST PRESERVE	Date: 0-13- Phone: 919-524-3354
Daniel 1007 Meserve	72
Description of Proposed Work: NO CONSTOUR	Total Job Cost: 229 000
	Total Job Cost: 229 000
Southern Touch Homes, LLC	Information
Building Contractor's Company Name	919-524-3354
P.O. Box 2135 Angler, NC 27501	Telephone
Address	southerntouchhomeslle@gmail.com
78270	Email Address
License # HEATED SQ FT 100	SARAGE SQ FT 4109
Paration Electrical Contract	
Description of Work Electrical Contractor	ervice Size: Amns T-Pole:
	ervice Size:Amps T-Pole: Ves No
Electrical Contractor's Company Name	919-427-6952
19655 NC Hwy 210 Angier, NC 27501	Telephone
Address	
13075	Email Address
Mainstream Mechanical HVAC	A10.01
Mechanical Contractor's Company Name	919-934-9339
412 Lazy Branch Drive Benson, NC 27504	Telephone
Address	mainstreammechanical@gmail.com
31005	Email Address
License #	
Description of Work	nformation
agoniphon of AAOLK	
Double J Plumbing	# Baths
Plumbing Contractor's Company Name	910-814-7705
614 Byrd Pond Road Bunnlevel, NC 28323	Telephone
Address	jamiejohnsonplumbing@gmail.com
21649	Email Address
icense #	
ri City Insulation 224 F	formation
City insulation 334 East Mtn. Dr. Fovetterille, N.C. access	
nsulation Contractor's Company Name & Address	910-486-8855
	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

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 feé schedule.

6-13-23

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

The undersigned applicant being the:	Compensation N.C.G.S. 87-14
General Contractor Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perium that the	Officer/Agent of the Contractor or Owner
set forth in the permit:	e person(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has ob	tained workers' compensation insurance to cover them.
them. Has one (1) or more subcontractors(s) and ha	as obtained to cover them.
aloni.	as obtained workers' compensation insurance to cover them.
covering themselves.	as their own policy of workers' compensation insurance
rias no more than two (2) employees and no s	Ubcontractors
Wille Working on the most of	Qualit it is understant u
Sign w/Title: Bryont The	
	Date: 10-13-23