

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

Owner's Name: Ken Harvey Homes, LLC	Date: 06/20/2023	
Site Address: 288 Deer Tail Lane, Fuquay Varina, NC 27526	Phone: 919-999-4150	
Subdivision: Cotton Farms	Lot:34	
Description of Proposed Work: Single Family Home	Total Job Cost:	
General Contractor Information		
Ken Harvey Homes, LLC	919-999-4150	
Building Contractor's Company Name	Telephone	
508 Lansbury Street, Wake Forest, NC 27587	andy.beaird@kenharveyhomes.com	
Address	Email Address	
81986 HEATED SQ FT 2893 GARAGE SC		
Description of Work New Construction Service Size: 200 Amps T-Pole: X Yes No		
Romanoff Electric Residential, LLC Electrical Contractor's Company Name	919-848-4652 Telephone	
3006 Industrial Dr. Ste 120, Raleigh, NC 27609	cmcnutt@romanoffgroup.cc	
Address	Email Address	
U.12915		
License #	antia a	
Mechanical/HVAC Contractor Information		
Description of Work New Construction		
Carolina Air Conditioning Company, Inc. Mechanical Contractor's Company Name	919-683-2421 Telephone	
	ggp@carolinaac.com	
360 Spectrum Dr, Ste 110, Knightdale, NC 27545 Address	Email Address	
L.22084		
License #		
Plumbing Contractor Information		
Description of Work New Construction	# Baths 3.5	
Cutchins Plumbing, Inc.	919-366-3000	
Plumbing Contractor's Company Name	Telephone	
5030 Wendell Blvd., Wendell, NC 27591	cutchinsplumbing@yahoo.com	
Address	Email Address	
L.06722 License #		
Insulation Contractor Information		
Tatum Insulation II, Inc.	919-661-0999	
Insulation Contractor's Company Name & Address 519 Old Drug Store Rd., Garner, NC 27529	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	06/20/2023	
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 OwnerX O	fficer/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.		
X 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: Soll Office	Manager Date: 06/20/2023	