



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: Asset Development Inc Date 7-26-2023
Site Address: 63 Cotton fields lane Fuquay Verina NC 27526 Phone 919-868-9530
Subdivision Cotton farms Lot Lot 28
Description of Proposed Work: New Construction Total Job Cost _____

General Contractor Information

Michelle Naron Davis 919-868-9530
Building Contractor's Company Name Telephone
1249 Jerusalem Church Rd Kenly michelljohn9@gmail.com
Address Email Address

79940 **HEATED SQ FT** **GARAGE SQ FT**
License #

Electrical Contractor Information

Description of Work New Construction Service Size: _____ Amps T-Pole: Yes No
Rock Electric 919 631 5360
Electrical Contractor's Company Name Telephone
989 Long Branch Rd Smithfield NC _____
Address Email Address
U33721
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Stephenson Heating & Air 919 665 7787
Mechanical Contractor's Company Name Telephone
343 Shipwash drive Garner NC Stephensonhvac@aol.com
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work New Construction # Baths _____
LTP Plumbing 919 730 7965
Plumbing Contractor's Company Name Telephone
10 Oliver's Grove Rd Four Oaks NC 27534 Cjohnson0362@gmail.com
Address Email Address
30006 Christopher Ray Johnson
License #

Insulation Contractor Information

Garica Insulation LLC 919 482 2765
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.

Michelle Dawn Davis
Signature of Owner/Contractor/Officer(s) of Corporation

7.26.2023
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: Michelle Dawn Davis / Contractor Date: 7.26.2023