



Application # SFD2307-0030

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: Randall Byrd & Astri Byrd Date 10/3/23
Site Address: 1275 Peach Farm Rd Lillington, Nc 27546 Phone 910-591-8878
Subdivision: n/a Lot _____
Description of Proposed Work: new residence Total Job Cost 408000

General Contractor Information

R.A. Gregory Builders 910-984-6932
Building Contractor's Company Name Telephone
1948 NC Hwy 27 w Lillington, NC 27546 ragregorypropllc@gmail.com
Address Email Address
75757 **HEATED SQ FT** 2212 **GARAGE SQ FT** 988

License # _____

Electrical Contractor Information

Description of Work new service Service Size: 200 Amps T-Pole: ___ Yes x No
R.A. Gregory Electric 910-984-6932
Electrical Contractor's Company Name Telephone
1948 NC Hwy 27 w Lillington, NC 27546 ragregorypropllc@gmail.com
Address Email Address
u21717

License # _____

Mechanical/HVAC Contractor Information

Description of Work new complete residential install
J&M Heating & Air Conditioning Service 910-897-5501
Mechanical Contractor's Company Name Telephone
724 Turlington Rd Dunn, Nc 28334 Jandmhvac@centurylink.com
Address Email Address
17164

License # _____

Plumbing Contractor Information

Description of Work Rough in / Trim Out Plumbing # Baths 2.5
Double J Plumbing LLC 910-814-7705
Plumbing Contractor's Company Name Telephone
614 Byrd Rd Bunnlevel, NC 28323 jamiejohnsonplumbing@gmail.com
Address Email Address
21649

License # _____

Insulation Contractor Information

Cumberland Insulation Co / 4205 Clinton Rd Fayetteville, Nc 910-484-7118
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.

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

10/3/2023
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: Chris By

Date: 10/3/2023