



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: RMS Investments LLC, d/b/a One27Homes Date 07/25/23

Site Address: 196 Sawyer Mill Drive Phone (919)813-0123

Subdivision: Mason Landing Lot 12

Description of Proposed Work: single family residential Total Job Cost \$180,000

General Contractor Information

RMS Investments LLC, d/b/a One27Homes (919)813-0123

Building Contractor's Company Name Telephone

114 W. Main Street, Clayton, NC 27520 brittany@one27homes.com

Address Email Address

76333 **HEATED SQ FT** 1404 **GARAGE SQ FT** 400

License #

Electrical Contractor Information

Description of Work new single family residential Service Size: _____ Amps T-Pole: Yes No

Ogilvie Electric (919) 362-7000

Electrical Contractor's Company Name Telephone

7736 Blaney Franks Road, Apex, NC 27502 scheduling.ogilvieelectric@gmail.com

Address Email Address

17046

License #

Mechanical/HVAC Contractor Information

Description of Work new single family residential
Carolina Comfort (919)550-7111

Mechanical Contractor's Company Name Telephone

PO Box 190, Clayton, NC 27528

Address Email Address

31589

License #

Plumbing Contractor Information

Description of Work new single family residential # Baths 2

Thornton's Plumbing (919)550-4833

Plumbing Contractor's Company Name Telephone

3160-A Vinson Road, Clayton, NC 27527

Address Email Address

22152

License #

Insulation Contractor Information

TriCity - 7204 Becky Circle, Raleigh, NC 27615 (919)825-3857

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.

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

07/25/23
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: *Brittany Radziszewski* Date: 07/25/23