

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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

Application for Residential Building and Trades Permit

Owner's Name: GARMAN HOMES	Date8/2	22/23	
Site Address: 400 SNEED LANE	Phone 919-830-	5309	
Subdivision: SERENITY	Lot _ 269		
	Total Job Cost 310,000		
General Contractor			
GARMAN HOMES	919-830-5309		
Building Contractor's Company Name	Telephone	Telephone	
4000 PARAMOUNT PKWY, SUITE #250 MORRISVILLE, NC 27560	LINDSEYG@GARMANHOMES.C	LINDSEYG@GARMANHOMES.COM	
Address	Email Address		
62939 HEATED SQ FT 1850	GARAGE SQ FT 260		
License #			
Description of Work ALL ELECTRICAL WORK S	<u>or Information</u> Service Size: <u> 200 </u> Amps T-Pole: <mark>X </mark> Ye:	e Nc	
		31	
OGILVIE ELECTRIC Electrical Contractor's Company Name	<u>919-622-2148</u> Telephone		
5325 HIDWELL PLACE APEX, NC 27539	·	SCHEDULING.OGILVIEELECTRIC@GMAIL.COM	
Address		Email Address	
	Email Address		
17046 License #			
Mechanical/HVAC Conti	actor Information		
Description of Work ALL MECHANICAL WORK			
JW ULTRA AIR	919-348-9399		
Mechanical Contractor's Company Name		Telephone	
3200 LAKE WOODARD DR RALEIGH, NC 27604	·	COM	
Address	Email Address	<u>ULTRA.WLONG@GMAIL.COM</u> Email Address	
18881			
License #			
Plumbing Contracto	or Information		
Description of Work ALL PLUMBING WORK	# Baths 2.5		
TITAN'S PLUMBING	919-615-1947		
Plumbing Contractor's Company Name	Telephone		
PO BOX 1045 DUNN, NC 28335	BUSINESS@TITANSPLUMBIN	G.COM	
Address	Email Address		
34800			
License #			
Insulation Contracto	or Information		
LIVE GREEN, INC. 5001 OLD POOLE RD. RALEIGH, NC 27610			
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.

FOR GARMAN HOMES

8/22/23

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:		
X 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:		
X 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: STARTS COORDINATOR FOR GARMAN HOMES Date: Date:		