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

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

Application for Residential Building and Trades Permit

Owner's Name: Paramount Jours, Treseporate	Date 8-22-2023
Site Address: 70 Datton Ct Fuguey Varia	a Phone 119.60
Cubdivision: (- ++ 010 Pm + AM h	
Description of Proposed Work: New Single Family Res	Total Job Cost
Canaral Contractor Information	
Paramount Homes, Incorporated	919.608.4154 Telephone
Building Contractor's Company Name	03 wademacht Degahoo.co
Andress	Email Address
73 64 HEATED SQ FT 2886 GARAGE SQ	FT 53
License #	
Service Size:	ZOO Amps 1-Pole: TesNO
All Trade Contractors - Mc Grath Fletri	<u>919-4812429</u>
Electrical Contractor's Company Name	Telephone bcusher@alltradecontractors.com
Address Cary, NC 27519	Email Address
23/79-5FD Desen Cusher-holder	
Mechanical/HVAC Contractor Inform	ation
Description of Work Nove Residential SF Home	- Heat Pump HVAC
All Trade Contractors - Joshue Pring (Holder) Mechanical Contractor's Company Name	919.481.2429 Telephone
Address Cory, NC 27519	Tringa all tradecontractors, co Email Address
36013 H.3 Class 1	
Plumbing Contractor Information	
Description of Work New Residential 5 Ftome	_# Baths
Plumbing Contractor's Company Name	9 (9 · 2 7 0 - 6 8 6 9 Telephone
4318 Triland Way Cary, NC 27518 Address	Tom@ sweetwaterplumbing 11c. con Email Address
23793 Tom Bailey holder	
License # Insulation Contractor Information	on
- 1	0.0 777-9000
Insulation Contractor's Company Name & Address 276	719.772 1000

*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.

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

	Affidavit for Worker's Com	pensation N.C.G.S. 87-14	
The undersign	igned applicant being the:		
Ger	eneral Contractor Owner	Officer/Agent of the Contractor or Owner	
Do hereby co	confirm under penalties of perjury that the per the permit:	rson(s), firm(s) or corporation(s) performing the work	
Has t	three (3) or more employees and has obtaine	ed workers' compensation insurance to cover them.	
Has o	one (1) or more subcontractors(s) and has ob-	btained workers' compensation insurance to cover	
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.			
Has r	no more than two (2) employees and no subo	contractors.	
Department to issuance	nt issuing the permit may require certificates of e of the permit and at any time during the permit the work.	ight it is understood that the Central Permitting of coverage of worker's compensation insurance prior mitted work from any person, firm or corporation Date: B - 22 - 202	