

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: MCYKEL! TITTANY BLACKMAN	Date 15 FEB 24
Site Address: 1024 W BLACKMAN RVD, DUNN	Phone 9/0-658-4665
Out division 14/ R. ACK MARRI P.D.	Lot 1
Description of Proposed Work: NEW SINGLE FAMILY DETAIL	Total Job Cost #371,774.53
General Contractor Information	
	910 303 4828
Building Contractor's Company Name	Telephone
PO BOX 4178, PINEHURST NC 28374	Pridebuiltuce gmail.com
Address	Email Address
82770 HEATED SQ FT 2236 GARAGE SC	QFT Ø
License #	
Electrical Contractor Informatio	<u>n</u>
Description of Work NEW RESIDENTIAL SUCCENKAL Service Size:	200 Amps T-Pole: X YesNo
HULMAN ELECTRIC COMPANY	910-485-8617
Electrical Contractor's Company Name	Telephone
345 WILKES RO, FAMETHENIUR NC 28306	ADMIN @ ALLMAN ELECTRIC. CO
Address	Email Address
20507	
License #	
Mechanical/HVAC Contractor Information	
Description of Work INSTAURTION OF NEW MECHA	NICAL SYSTEM.
OVERHUS HEATING & AIR, CIC	910-322-5113
Mechanical Contractor's Company Name	Telephone
	OVERHILLS HEATWAND AIR @ GARAIL CO
Address	Email Address
24106	
License #	
Plumbing Contractor Informatio	
Description of Work NEW RESIDENTIA PCUMBING SYSTEM	_# Baths
JESSE INGRAM	910 639 9499
Plumbing Contractor's Company Name	Telephone
Address 28315	Jesspingram o gmail.com
Address 28315	Email Address
28231	
License #	
Insulation Contractor Informatio	910-486-8855
TRI CITY	110-480 002
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 bysigning-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.

| President | 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:	
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 PRINE CUSTOM HOMES, INC Date: 15 FEB24	