



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: SBM Homes LLC Date 11-21-23
Site Address: 276 Ray Byrd Phone 919-478-0965
Subdivision: Ray Byrd Lot 62
Description of Proposed Work: New Residential Home Total Job Cost \$202,500.00

General Contractor Information

SBM Homes LLC 919-478-0965
Building Contractor's Company Name Telephone
PO Box 71 Raleigh NC 27605 byrdconstruction@gmail.com
Address Email Address
87442 HEATED SQ FT _____ GARAGE SQ FT _____
License #

Electrical Contractor Information

Description of Work New Wiring Service Size: 200 Amps T-Pole: Yes No
S.M. Pope Electric LLC 910-890-3655
Electrical Contractor's Company Name Telephone
409 Chatham St Sanford NC 27330 marshallpope74@gmail
Address Email Address
213266
License #

Mechanical/HVAC Contractor Information

Description of Work New HVAC
Total Systems HVAC 910-436-3450
Mechanical Contractor's Company Name Telephone
13341 NC Hwy 210 South Spring Lake NC 28390 apetotalsystemsnc.com
Address Email Address
28846
License #

Plumbing Contractor Information

Description of Work New Plumbing # Baths _____
Heve Plumbing Inc 919-770-5308
Plumbing Contractor's Company Name Telephone
412 Swaringen Lane Sanford NC 27332 plumberman98@gmail
Address Email Address
19443
License #

Insulation Contractor Information

True Team Builders Service 7204 Backy Circle 919-790-9684
Insulation Contractor's Company Name & Address Telephone
Raleigh NC 27615

*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 of Owner/Contractor/Officer(s) of Corporation

11-21-23

 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:

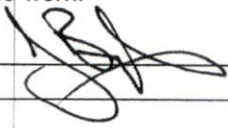
_____ Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

_____ 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:  Manager Date: 11-21-23