

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: Great Southern Homes	Date 4-9-2024
Site Address: 159 Grand Griffon Way (lot 8)	Phone 919-268-9127
Subdivision: Griffon Pointe	Lot _8
Description of Proposed Work:New single family home- Sonoma II Pla	^{In} Total Job Cost\$338,628
General Contractor Informa	
Great Southern Homes	919-650-8224
Building Contractor's Company Name	Telephone
933 Old Knight Road, Knightdale, NC 27545	penningtonnieri@greatsouthernhomes.c
Address	Email Address
100027 HEATED SQ FT 3133 GARAGE	E SQ FT 462
License #	
Electrical Contractor Information Description of Work Wire home per residential code Service Size	<u>ation</u> ize: _ ²⁰⁰ Amps T-Pole: <mark>✓</mark> _YesNo
Tool Time Electric	919-422-7364
Electrical Contractor's Company Name	Telephone
PO Box 1347, Apex, NC 27502	brandon@tooltimeelectric.com
Address	Email Address
31034-I	
License #	
Mechanical/HVAC Contractor Inf	ormation
Description of Work Install HVAC per residential code	
Weather Master	919-369-7815
Mechanical Contractor's Company Name	Telephone
305 Village Drive, Knightdale, NC 27545	LHill@WeatherMaster.com
Address	Email Address
17326	
License #	ation.
Plumbing Contractor Informa	
Description of Work Install plumbing + fixtures per code	# Baths 3.5
Titan's Plumbing	919-615-1947
Plumbing Contractor's Company Name	Telephone
PO Box 1045, Dunn, NC 28334	kvargas@titansplumbing.com
Address	Email Address
34800 License #	
License # Insulation Contractor Inform	ation
Livegreen 5001 Old Poole Road, Raleigh	919-453-6411
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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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 *quirrent fee schedule*.

4-9-2024

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:		
\underline{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.		
\underline{X} 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.		