

Application #

\* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

## Application for Residential Building and Trades Permit

on on license.	- 1
Owner's Name: NCT Specialty Contracting, Inc Date: 2-21-2 Site Address: 200 Deer Tail Lance Fugury Varira Phone: 91927019	4
Site Address: 200 Deer Tail Lanc Fuguay Varira Phone: 91927019	28
Subdivision: Cotton tams Lot: 30	
Description of Proposed Work: New Single Family Homeotal Job Cost: 550,000	
General Contractor Information	
NCT Specialty Contraction Inc 919-270-1928	
Building Contractor's Company Name Telephone	
8344 Musifield Dr. Figury Varina Davida NCTSpecialty	1. com
Address	
73212 HEATED SQ FT 2967 GARAGE SQ FT 750	
License #	
Electrical Contractor Information	
Description of Work Wing new home Service Size 200 Amps T-Pole: Yes No	
Too Time Services 919-422-6607	
Electrical Contractor's Company Name	1
Po Box 2207 Garner NC 27529 Pavlwebb 94 05 mail Address	211,20
Address Email Address	
30306-U James Wandland	
License #	
Mechanical/HVAC Contractor Information	
Description of Work HVAC For new single family home	
Duke's HVAC 919-779-0498	
Mechanical Contractor's Company Name	4.
7429 Old Barcom Rd. Raleigh ome4hrac abells	south
Address 1/6 Email Address	net
22029	,,,,,
License #	
Plumbing Contractor Information	
Description of Work Plumb a new Single Finily # Baths 3/2	
Description of Work 11-1306	
Plumbing Contractor's Company Name  Plumbing Contractor's Company Name  Telephone	
Plumbing Contractor's Company Name  5060 Trademark Drive Rakerch garyparaleichok	mb)-
	mus
Address Email Address	som
15 75 P-Class 1	To the second second
License #	
Classification Contractor Information 9199378543	>
Stephens Duilding Fraducts	J
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.

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: Date: 2-21-24