



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: Furr Construction Date _____
Site Address: 1520 Shady grove road Phone 910-424-3877
Subdivision: Shady grove Lot 2
Description of Proposed Work: New construction Total Job Cost 350,000

General Contractor Information

Furr Construction 910-424-3877
Building Contractor's Company Name Telephone
PO Box 2824 Fayetteville NC 28302 taylor@furrconstruction.com
Address Email Address
67520 **HEATED SQ FT** 2548 **GARAGE SQ FT** 549
License #

Electrical Contractor Information

Description of Work New construction Service Size: 200 Amps T-Pole: Yes No
Tarheel Pride electric 910-858-0000
Electrical Contractor's Company Name Telephone
PO Box 458 Stedman NC 28391 thpelectric02@yahoo.com
Address Email Address
22985-L
License #

Mechanical/HVAC Contractor Information

Description of Work New construction
certified heating and air 910-531-3595
Mechanical Contractor's Company Name Telephone
207 David Parnell St Parkton NC 28371 Certifiedheatingandairllc@gmail.com
Address Email Address
20012
License #

Plumbing Contractor Information

Description of Work New construction # Baths _____
Carolina Plumbing Solutions 910-728-0630
Plumbing Contractor's Company Name Telephone
17 Parkton Pl #17B Parkton NC 28371 lauren.rice@cpsfayetteville.com
Address Email Address
35556
License #

Insulation Contractor Information

Stornaway Construction PO Box 669 hope mills NC 910-988-4070
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.

D. Allen Furr
Signature of Owner/Contractor/Officer(s) of Corporation

02/21/24
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: [Signature] CFO Date: 02/21/24