

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**

The second secon		
Owner's Name: Ken Dowson Homes, Inc.	Date 03-13-2014	
Site Address: 2686 Hedges Chapel Rd. Dum, NL 2833	Phone <u>991423-6979</u>	
Subdivision: Rt. Rayla Dec	Lot /	
Description of Proposed Work: Sayle Furth Res. New Construction	Total Job Cost \$ 250,000.00	
General Contractor Information		
Lea Druxon Homes, Inc.		
Building Contractor's Company Name	(919) 422-6979 Telephone	
2493 NC HWY 242 N. Benson, NL 27504	Kenndawson@ hotmail.com	
Address	Email Address	
59981 WEATED SOFT 1578 GARAGES	570	
License # Electrical Contractor Information	an .	
Description of Work SFR New Constantion Service Size:	200 Amps T-Pole: Yes No	
BP Electric Service, Inc.	<u>(919) 669 - 445 Y</u> Tetephone	
Electrical Contractor's Company Name	Telephone	
7726 Chapel Hill Rd. Cary, NC 27513 Address	h 8000 hell south, net Email Address	
<u>SP. SFP. 32661</u> License #		
Mechanical/HVAC Contractor Inform	nation	
Description of Work SFR New Construction		
0 1 1 1	919 963-0001	
Mechanical Contractor's Company Name	A19) 963-0001 Telephone travis@centralairce.com	
2040 NC Hwy. 965, Four Oaks, NC 27524 Address	travis@ centralair re.com Email Address	
1.28699		
License #	_	
Plumbing Contractor Information		
0	_# Baths	
Marke J Phinterney, LLC	910 - 814 - 7705 Telephone	
Plumbing Contractor's Company Name	Variable and A. O and Var	
Address Address	mail oldress limber a meril. com	
L. 21649		
Insulation Contractor Information	on .	
Garcia Insulation LLC 1720 Couchers Neb Rd. Middlex,	919-422-2765	
Insulation Contractor's Company Name & Address NL 27557	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 wner/Contractor/Officer(s) of Corporation

03-13-2024

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 all any time during the permitted work from any person, firm or corporation carrying out the work.		
Sign w/Title: Date: 03-13-302 4		