

Must be owner/occupier or illcensed contractor. Address, company name & phone must match information on license, 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

## Application for Residential Building and Trades Permit

Owner's Name: LGI Homes	Date 4/3/24
Site Address: 402 Ivy Bank Drive, Angier, NC 27501	Phone 919-520-8406
Subdivision: Atherstone	Lot 116
Description of Proposed Work: New Construction	Total Job Cost <u>\$ 140,000</u>
General Contractor Information	10tal 300 Cost 3 1 10, 000
LGI Homes	919-520-8406
Building Contractor's Company Name	Telephone
1450 Lake Robbins Dr. Ste 430, The Woodlands, TX 77380	oliver.hudson@lgihomes.com
Address	Email Address
74803	
License #	The state of the s
Description of Work New Castronal Service Size	
Service Size:	Amps T-Pole:YesNo
Electrical Contractor's Company Name	919-667-1600
103 Flam on St. Condonner AV 03 C30	Telephone
103 Fluming St., Cheedmoor NC 27522	J. Crowotrein C Oyohoo.com
20925	Email Address
License #	
Mechanical/HVAC Contractor Informa	£:
Description of Work New Contraction	HIOI
Caryl Mechanical	744 600 1600
Mechanical Contractor's Company Name	714-882-4522
5910 Stockbridge Dr., Monroe NC 28110	Telephone
Address J. Morrio NC 2011	I byrd @ Ceryl mechanicals. com
16647	Email Address
License #	
Plumbing Contractor Information	
Description of Work New Constraints	
Titans Plumbing	# Baths_
Plumbing Contractor's Company Name	919-618-1947
PO BOX 1045, DUNN NC 28335	Telephone
Address	businessetitansplumong.com
3480D	Email Address
License #	
Insulation Contractor Information	
1 arum Lingulation	919-661-0999
nsulation Contractor's Company Name & Address	Telephone

\*MOTE: General Contractor / owner must fill out and sign the second page of this application.

strong roots · new growth



Davidson

is as per current fee schedule.

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

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

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 ✓ 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. Regional Construction Munger Date: