

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

Application for Residential Building and Trades Permit

Owner's Name:LGI Homes	D : 4/3/24
Site Address: 325 Ivy Bank Drive, Angier, NC 27501	Date 4/3/24 Phone 919-520-8406
Subdivision: Atherstone	
Description of Proposed Work: New Construction	Lot 125
	Total Job Cost <u>3 140,000</u>
General Contractor Information 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 #	
Description of Work New Control of Work New Co	
Service Size:	Amps T-Pole: Yes No
Electrical Contractor's Company Name	419-667-1600
103 Fluming St., Cheedmoor NC 27522	Telephone
Address	J. Crobotrecin C Oyohoo.com
20925	Email Address
License #	
Mechanical/HVAC Contractor Information	ation
Description of Work Nan Construction	
Cary Mechanical	714-882-4522
Mechanical Contractor's Company Name	Telephone
5910 Stockbridge Dr., Monroe NC 28110	I byrd @ Cery mechanicals. com
Address	Email Address
16647	
License #	
Plumbing Contractor Information	1
Description of Work New Constrantion	# Baths_
11tuns Pumbing	919-1018-1947
Plumbing Contractor's Company Name	Telephone
PO BOX 1045, DUNN NC 28335	businessetitansplumang.com
Address 34800	Email Address
License #	
Totum Ensulation Contractor Information	010-61-1 0000
nsulation Contractor's Company Name & Address	419-661-0999
2 - Madde a Company Hama & Mudress	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: 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. - Regional Construction Money extrate:__.