



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: Jose Morales Date 04/17/2024
Site Address: Jasmine Road Fuquay Varina NC Phone (919)762-2121
Subdivision: Captain's Landing Lot 8
Description of Proposed Work: Singel Family Home Total Job Cost \$65,000.00

General Contractor Information

Jose Morales (919)762-2121
Building Contractor's Company Name Telephone
Address Email Address
License # HEATED SQ FT 1318 GARAGE SQ FT

Electrical Contractor Information

Description of Work All Electrical work Service Size: 200 Amps T-Pole: Yes No
CDF Electric INC. (919) 414-8121
Electrical Contractor's Company Name Telephone
70 Leghorn Drive Zebulon NC 27597 cdf414@gmail.com
Address Email Address
L.33572
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC Job
Yellow Dot (919) 925-4225
Mechanical Contractor's Company Name Telephone
2400 Summer Blvd Raleigh NC 27616
Address Email Address
32872
License #

Plumbing Contractor Information

Description of Work All Plumbing job # Baths 2
Jarheads Plumbing LLC (718) 404-2388
Plumbing Contractor's Company Name Telephone
113 Heart Pine Lane Newton Grove NC 28366 kelsyn79@yahoo.com
Address Email Address
36145
License #

Insulation Contractor Information

Tricity Insulation NC / 7204 Becky Cir Raleigh NC 27615 (919) 790-9684
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.

Jose Morales

04/17/2024

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:

Jose Morales

Date: 04/17/2024