



Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. 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: Ken Harvey Homes, LLC Date: 07/16/2024
Site Address: 191 Cotton Fields Lane, Fuquay Varina 27526 Phone: 919-999-4150
Subdivision: Cotton Farms Lot: 24
Description of Proposed Work: Single Family Home Total Job Cost: _____

General Contractor Information

Ken Harvey Homes, LLC 919-999-4150
Building Contractor's Company Name Telephone
508 Lansbury Street, Wake Forest, NC 27587 andy.beaird@kenharveyhomes.com
Address Email Address
81986 **HEATED SQ FT 2587.5 GARAGE SQ FT 640.9**
License #

Electrical Contractor Information

Description of Work New Construction Service Size: 200 Amps T-Pole: X Yes ___ No
Romanoff Electric Residential, LLC 919-848-4652
Electrical Contractor's Company Name Telephone
3006 Industrial Dr, Ste 120, Raleigh, NC 27609 cmcnutt@romanoffgroup.cc
Address Email Address
U.12915
License #

Mechanical/HVAC Contractor Information

Description of Work New Construction
Carolina Air Conditioning Company, Inc. 919-683-2421
Mechanical Contractor's Company Name Telephone
360 Spectrum Dr, Ste 110, Knightdale, NC 27545 ggp@carolinaac.com
Address Email Address
L.22084
License #

Plumbing Contractor Information

Description of Work New Construction # Baths _____
Cutchins Plumbing, Inc. 919-366-3000
Plumbing Contractor's Company Name Telephone
5030 Wendell Blvd., Wendell, NC 27591 cutchinsplumbing@yahoo.com
Address Email Address
L.06722
License #

Insulation Contractor Information

Tatum Insulation II, Inc. 919-661-0999
Insulation Contractor's Company Name & Address Telephone
519 Old Drug Store Rd., Garner, NC 27529

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

07/16/2024
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:

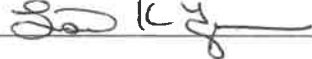
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  Office Manager Date: 07/16/2024