

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

Owner's Name: Great Southern Homes Inc		Date 7-8-24		
Site Address: 45 Covey Rise Way Lillington NC	Phone	040 050 0400		
		14		
Subdivision: Griffon Pointe	Lot			
Description of Proposed Work: New Single Family residential	Total Job Cost _	272,653		
General Contractor Information				
Great Southern Homes Inc 919-250-8428				
Building Contractor's Company Name	Telephone			
933 Old Knight Road Knightdale NC 27545	blakewhitaker@gr	reatsouthernhomes.com		
Address	Email Address			
100027 HEATED SQ FT 2002 GARAGE S	Q FT 402			
License #				
Description of Work wire home per residential code Service Size:	<u>on</u> 200 Amps T-P	ole: <u>V</u> YesNo		
Tool Time Electric	919-422-7364	•		
Electrical Contractor's Company Name	Telephone			
PO Box 1347 Apex NC 27502	Brandon@tooltimeelectric.com			
Address	Email Address			
31034-I				
License #	_			
Mechanical/HVAC Contractor Inform	<u>nation</u>			
Description of WorkInstall HVAC per residential Code				
Bowman Mechanical	919-772-2759			
Mechanical Contractor's Company Name	Telephone			
145 Technical Court Garner NC 27529	nathan@bowmanmechanicalservices.com			
Address	Email Address			
34416				
License # Plumbing Contractor Information				
				
Description of Work install plumbing per residential code	# Baths2.5			
Titan's Plumbing	919-615-1947			
Plumbing Contractor's Company Name	Telephone			
PO Box 1045 Dunn NC 28334	kvargas@titansplumbing.com			
Address	Email Address			
34800				
License # Insulation Contractor Information				
	919-453-641	11		
		_		
Livegreen 5001 Old Poole Road Raleigh 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.

Blake Whitaker		7-8-24		
Signature of Owner/Contractor/Officer(s) of	of Corporation	Date		
A 46: -la.v.: 4 6 a.v. 18/ a.v.		anastian N.C.O.S.	07.44	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
General Contractor Ow	vner	Officer/Agent of the Co	ntractor 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 a	and has obtained	d workers' compensatio	n insurance to cover them.	
${\text{them.}}$ Has one (1) or more subcontractors	s(s) and has obt	ained workers' comper	sation 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.				
Sign w/Title: Blake Whitaker	Operations	Manager	Date: 7-8-24	