

* 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	2. 5/12/24
Site Address: TBD, Angier, NC 27501	Date <u>5/13/24</u> Phone 919-520-8406
Subdivision: Atherstone	Lot 164
Description of Proposed Work: New Construction	
General Contractor Information	Total Job Cost <u>\$ 140,000</u>
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 FEATED SOIR 1800 GARAGE SO	375
License #	Sheeper
Description of Work New Contractor Information Service Size:	Amps T-Pole: Yes No
Jarahtree	919-667-1600
Electrical Contractor's Company Name	Telephone
103 Fluming St., Creedmoor NC 27522	J. Characterin C Cyonod Com
Address	Email Address
20925 License #	,
Mechanical/HVAC Contractor Information	ti
Description of Work Now Bouleauth J	ation
Caryl Michanical	701 000 - 1602
Mechanical Contractor's Company Name	7)4-882-4522 Telephone
5910 Stockbridge Dr. Monne NC 28110	I byrol @ Corry mechanicas. com
Address	Email Address
16647	
License #	
Plumbing Contractor Information	1
Description of Work New Construction	# Baths
Titans Pumbing Plumbing Contractor's Company Name	419-616-1947
PO BOX 1045, Dunn NC 28335	Telephone
Address	businessetitansplumbing.com
Address 34800	Email Address
License #	
Insulation Contractor Information	1 0.0 / 1
atum Insulation	419-661-0999
Insulation Contractor's Company Name & Address	Telephone

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



Davidson

is as per current fee schedule.

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! 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

Signature of Owner/Contractor/Officer(s) of Corporation Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: Owner _____ Officer/Agent of the Contractor or Owner General Contractor 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

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.

covering themselves.

- Regionne Construction Monage, Date: