

 Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Application #

Harnelt 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.harnelt.org/permits

Application for Residential Building and Trades Permit

Owner's Name: D	rees Homes	Date <u>07/1</u> 9/2024
Site Address:	257 Grading Stick	Phone 919-844-9288
Subdivision:	Tobacco R	oad Lot _ 50
Description of Proposed Work: SFD		Total Job Cost _ 589,545
	General Contrac	
Drees Hon		919-844-9288
Building Contractor	's Company Name	Telephone
8521 Six Forks Rd, #500		ttrefftzs@dreeshomes.com Email Address
	HE ATTEM OF THE 3573	GARAGE SQFT 732
_39440 License #	TEANED SUFFE SSTS	GARAGE SQUEE 132
December of Mari	Electrical Contrac	stor Information
		Service Size:Amps T-Pole: _X_YesNo
All Trade Contre	actors r's Company Name	
	pad	• ***
23179		aman, taaroo
License #	Machania (IIII) (A.C. Carr	Anna dan Indonesia da
Departulian of World	Mechanical/HVAC Cor	
	SFD	
Mechanical Contract	ractors tor's Company Name	
	ASSESSED 00 100 (100 pt 1 1 € 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•
Address		Email Address
License #		
License #	Plumbing Contrac	tor Information
Description of Work	SFD	
Plumbing Contractor	r's Company Name	Telephone
200 Tinsteel C	ourt	pop@poolesplumbing.com
Address		Email Address
License #		
	<u>Insulation Contrac</u>	tor Information
Tri City Insula		919-700-0004
Insulation Contractor	r'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.

07/19/2024

Date

Tori Trofftzs
Signature of Owner/Contractor/Officer(s) of Corporation

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
General Contractor OwnerX 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:
X 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/Tille: Teri Trefftzs Date: 07/19/2024