



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 PermitOwner's Name: Richard Weber Date 7-25-24Site Address: 173 Mamie Upchurch Rd., Lillington, NC 27546 Phone (203) 788-2724

Subdivision: _____ Lot _____

Description of Proposed Work: New SFD Total Job Cost \$ 650,000**General Contractor Information**

Milton Built Homes, LLC (910) 890-0555
 Building Contractor's Company Name Telephone

PO Box 451, Lillington, NC 27546 andrew@miltonenterprisesinc.com
 Address Email Address

87180 HEATED SQ FT 3480 GARAGE SQ FT 1281
 License #

Electrical Contractor InformationDescription of Work New SFD Service Size: 400 Amps T-Pole: Yes No

Dawson's Electric, Inc. (919) 552-0246
 Electrical Contractor's Company Name Telephone

280 Jarco Drive, Fuquay-Varina, NC 27526 nikki@dawsonselectric.com
 Address Email Address

25948
 License #

Mechanical/HVAC Contractor InformationDescription of Work New SFD

J+M Heating and Air Condition Co., Inc. (910) 897-5501
 Mechanical Contractor's Company Name Telephone

724 Turlington Road, Dunn, NC 28334 _____
 Address Email Address

17164
 License #

Plumbing Contractor InformationDescription of Work New SFD # Baths 3 1/2

Camden's Plumbing + Repair, Inc. (919) 557-1584
 Plumbing Contractor's Company Name Telephone

7229 Oak Village Way, Fuquay-Varina, NC 27526 _____
 Address Email Address

18903
 License #

Insulation Contractor Information

Friends Insulation, 2001 Blount Creek Est., Clayton, NC 27520 (919) 291-2438
 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.

Andrew W. Mitt
Signature of Owner/Contractor/Officer(s) of Corporation

7-25-24
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: Andrew W. Mitt, Project Manager

Date: 7-25-24