



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: Dave & Patricia Anderson Date: 7-31-24
Site Address: Hobby Road Phone: 919-601-0689
Subdivision: _____ Lot: 9
Description of Proposed Work: New Home Total Job Cost: \$493,970.

General Contractor Information

Trust Construction 919-669-0928
Building Contractor's Company Name Telephone
4009 Graham Newton Rd. trustconstruction14@gmail.com
Address Email Address
861816 HEATED SQ FT 2318 GARAGE SQ FT 616
License #

Electrical Contractor Information

Description of Work New Single Family Service Size: 200 Amps T-Pole: Yes No
Cook Electric 919-427-1279
Electrical Contractor's Company Name Telephone
Randy Edward Lee Cook 9332 cookselectric@gmail.com
Address Ransdell Rd Email Address
18967 Raleigh, NC .com
License # 20603

Mechanical/HVAC Contractor Information

Description of Work New Single Family
Envir Air 919-375-4139
Mechanical Contractor's Company Name Telephone
2664 Timber Drive Garner NC enviroainnc@gmail.com
Address 27529 Email Address
29532
License #

Plumbing Contractor Information

Description of Work New Single Family # Baths 2 1/2
Michael Ray Smith 919-868-3060
Plumbing Contractor's Company Name Telephone
109 Ablitzd Lane Angier, NC regina-g-smith@yahoo.com
Address 27501 Email Address
18200
License #

Insulation Contractor Information

Tri-City 919-612-3636
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.

Scott P. Galt
Signature of Owner/Contractor/Officer(s) of Corporation

7-31-24
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: Scott P. Galt owner Date: 7-31-24