Macari



Application # _____

* Must be owner/occupier or flicensed 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.hamett.org/permits

Application for Residential Building and Trades Permit

Owner's Name:LGI Homes	Date 8/7/2024
Site Address: 380 Taverners Lane, Angier, NC 27501	Phone 919-520-8406
Subdivision: Atherstone	Lot 4
Description of Proposed Work: New Construction	Total Job Cost \$125,000
LGI Homes General Contractor Information	
LOT Homes	919-520-8406
Building Contractor's Company Name	Telephone
1450 Lake Robbins Dr. Ste 430, The Woodlands, TX 77380 Address	oliver.hudson@lgihomes.com
74803	Email Address
License #	
Description of Work New Bastradia Service Size:	
Description of Work New Gastradio Service Size:	
Electrical Contractor's Company Name	919-667-1600
103 Fluming St., Cheedmoor NC 27522	Telephone
Address	J. Chalotrein C Cyohop · com Email Address
20925	
License #	
Description of Work Now Contractor Information	ation
Cary Mechanical	200 000 1600
Mechanical Contractor's Company Name	704-882-4522
5910 Stockbridge Dr. Monroe NC 28110	Telephone I byrol @ Clury I mechanicals . Com
Address	Email Address
16647	21101171000
License #	
Plumbing Contractor Information	1
Description of Work New Construction	# Baths
Plumbing Contractor's Company Name	919-616-1947
PO BOX 1045, DUNN NC 28335	Telephone
Address	business etitansplumlang. Com
3480D	Ciliaii Addiess
License #	
Insulation Contractor Information Totum Insulation	010-111-000
Insulation Contractor's Company Name & Address	919-661-0999
modiation contractor's company Name & Address	Telephone

"MOTE: 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.

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 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: Laid In - Regional Construction Many exDate:	