

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**

	Date:
Owner's Name: Adams Humes AEC, LLC	
Site Address: 30 Filling Creek Dr. Fu	
Subdivision: The Pressure at Kipling Creek	Lot:Lot: \$250,000,00
Description of Proposed Work: Single Family Dwelling	I Dial Job Cost.
General Contractor	Information
Adams Homes AEC LLL	919-233-6747
Building Contractor's Company Name	Telephone
149 US Hwy 70 W. Garmer, NC 27529	Email Address
Address	Email Address
59785 <b>HEATED SO FI 3320</b>	GARAGE BOLFT 911
License # Electrical Contractor	Information
Description of Work Single Family Home S	ervice Size: Mega Amps T-Pole: X Yes No
Kearns	918-388-7852
Electrical Contractor's Company Name	Telephone
Garner, NC	Reamselectricalservice@gmail.com
Address	Email Address
22699	
License #	
Mechanical/HVAC Contr	actor information
Description of Work construction split heat pump with quai	tity I gas pressure test
Description of Work Construction split heat pump with quan	210 000 0100
D&D HVAC, LLC  Mechanical Contractor's Company Name	Telephone
	Telephone
Mechanical Contractor's Company Name 605 Catham St. Sanford, NC 27330 Address	Telephone
Mechanical Contractor's Company Name 605 Catham St. Sanford, NC 27330	Telephone
Mechanical Contractor's Company Name 605 Catham St. Sanford NC 27330  Address 23371	Telephone Implante delivaçõe com Email Address
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Mechanical Contractor's Company Name 605 Catham St. Sanford NC 27330  Address 23371  License #  Plumbing Contractor  Titans  Plumbing Contractor's Company Name	Telephone Imitate delivative com Email Address  r Information # Baths 2.5
Mechanical Contractor's Company Name 605 Catham St. Sanford NC 27330  Address 23371  License #  Plumbing Contractor  Plumbing Contractor  Plumbing Contractor  Raleigh, NC	Telephone Imitate delivative com Email Address  r Information # Baths 2.5  19-615-1947 Telephone
Mechanical Contractor's Company Name 605 Catham St. Sanford NC 27330  Address 23371  License #  Plumbing Contractor  Plumbing Contractor  Raleigh, NC  Address	Telephone Imitate delivacite com Email Address  r Information  # Baths 2.5  =19-615-1947  Telephone  admin 6 titansservice com
Mechanical Contractor's Company Name 605 Catham St. Sanford. NC 27330  Address 23371  License #  Plumbing Contractor  Titans  Plumbing Contractor's Company Name  Raleigh, NC  Address 34800	Telephone Imitate debrache com Email Address  r Information  # Baths 2.5  = 19 - 615 - 1947  Telephone  admin 4 titansservice com Email Address
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\*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.

Amanda Allen

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 X 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/Title: Suarda Allen (permit Coordinatori) ate: 9/8/24	