

Application # \_\_\_\_\_

Harnett County Central Permitting

PO Box 85 Lillington, NC 27546

910-893-7545 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 KMB Building LLC Date 9-6-24  
Site Address 85 Roll Tide Ct, Angier NC 27 Phone 919-669-7140  
Subdivision Oak Grove Church Lot 7  
Description of Proposed Work New Total Job Cost \$250,000

General Contractor Information

Keith Brown Telephone 919-669-7140  
Building Contractor's Company Name KMB Building LLC  
805 Coley Farm Rd Fuquay Varina NC 27526 Email Address KMBC11@gmail.com  
Address 51713 HEATED SQ FT 1505 GARAGE SQ FT 653  
License # \_\_\_\_\_

Electrical Contractor Information

Description of Work New SFD Service Size 300 Amps T-Pole  Yes  No  
Alpha & Omega Electric of NC LLC Telephone 919-669-3418  
Electrical Contractor's Company Name 1084 Lake Ridge Dr, Creedmoor NC 27522 Email Address Ludwigelectrical@gmail.com  
Address 24828  
License # \_\_\_\_\_

Mechanical/HVAC Contractor Information

Description of Work New SFD Telephone 910-858-0000  
Certified Heating & Air  
Mechanical Contractor's Company Name PO Box 1071 Hope Mills NC 28348 Email Address Certifiedheatair@gmail.com  
Address 20012 HLCI  
License # \_\_\_\_\_

Plumbing Contractor Information

Description of Work New SFD # Baths 2  
Thornton's Plumbing Inc Telephone 919-550-4833  
Plumbing Contractor's Company Name 3160 -A Vinson Rd, Clayton NC 27527 Email Address TPI office 2@gmail.com  
Address 22152  
License # \_\_\_\_\_

Insulation Contractor Information

Tatum Insulation II Gumer NC Telephone 919-661-0999  
Insulation Contractor's Company Name & Address \_\_\_\_\_

\*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.

Keith Brewer  
Signature of Owner/Contractor/Officer(s) of Corporation

9-6-24  
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: Keith Brewer    Owner    Date: 9-6-24