

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. 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

Application for Residential Building and Trades Permit

Owner's Name: Johnson Home Builders 116	Date
	Phone 9194272976
	Lot
Description of Proposed Work: New House Construction	Total Job Cost 333,000.00 +
General Contractor Information	1 1 (
Building Contractor's Company Name	Telephone
Address Ch. scahall rd Angier NC 27561	Email Address
102567 HEATED SQ FT 2018 GARAGE SC	IFT 436
License #	
Description of Work 21ctrieg For New Hoservice Size:	200 Amps T-Pole: Yes No
Electrical Contractor's Company Name	9/9 639 - 4837 Telephone
731 mabry Rd, Angier NC 27501	
Address	Email Address
15077U License #	
Mechanical/HVAC Contractor Inform	ation
Stephenson Heating + Air Inc Mechanical Contractor's Company Name	1104.00
Stephenson Heating & Air Inc	919 329 0686
Mechanical Contractor's Company Name	Telephone
343 Shipwash Dr. Garner NC 27529 Address	Email Address
18644	
License #	
Plumbing Contractor Information	33.3
Description of Work Plumbing New house	
Plumbing Contractor's Company Name	919 422 2133
/	Telephone
Address Milwood In Angiel NC 27501	Email Address
17735	
License #	
Tri City Ingulation 3154 Comdon 12 5th	Telephone 910 486 8855
Insulation Contractor's Company Name & Address	Telephone
	710 986 0033

*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 bysigning 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.

Date

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

10-25-24

		r Worker's (Compe	sation N.C	C.G.S.	87-14		
The undersigned applic	ant being the	C -						
General Contra	actor	Owner	Of	icer/Agent of	the Cor	ntractor or	Owner	
Do hereby confirm unde set forth in the permit:	er penalties of	f perjury that th	ne person	(s), firm(s) or	corpora	tion(s) pe	erforming the wor	rk
Has three (3) or	more employ	ees and has of	btained w	orkers' compe	ensation	n insuranc	e to cover them.	
Has one (1) or m	nore subcontra	actors(s) and h	nas obtair	ed workers' c	compens	sation ins	urance to cover	
Has one (1) or movering themselves.	nore subcontra	actors(s) who h	has their	own policy of	workers	' compen	sation insurance	1
Has no more that	ın two (2) emp	ployees and no	subcont	actors.				
While working on the property Department issuing the to issuance of the permoderrying out the work.	permit may re	equire certificat	tes of coverentes	erage of work	ker's co any pers	mpensation, firm o	on insurance pric	
Sign w/Title:	en	me	_ '	me	1	Date: \	0-05-0	_~(