



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

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546  
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

**Application for Residential Building and Trades Permit**

\* 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.

Owner's Name: Adams Homes AEC, LLC Date: 11-4-24  
Site Address: 1108 Northwood Dr. Phone: 919-233-6747  
Subdivision: The Preserve at Kipling Creek Lot: 40  
Description of Proposed Work: Single Family Dwelling Total Job Cost: \$250,000.00

**General Contractor Information**

Adams Homes AEC LLC Telephone: 919-233-6747  
Building Contractor's Company Name: \_\_\_\_\_  
149 US Hwy 70 W. Garner, NC 27529 Telephone: naleighpermits@adamshomes.com  
Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
59785 HEATED SQ FT 1727 GARAGE SQ FT 397  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work: New Single Family Home Service Size: 200 Amps T-Pole:  Yes  No  
Kearns Telephone: 919-369-7852  
Electrical Contractor's Company Name: \_\_\_\_\_  
Garner, NC Telephone: kearnselectricalservice@gmail.com  
Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
22899  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work: New construction split heat pump with quantity 1 gas pressure test  
D&D HVAC, LLC Telephone: 919-628-2183  
Mechanical Contractor's Company Name: \_\_\_\_\_  
605 Catham St. Sanford, NC 27330 Telephone: imillan@dahvacllc.com  
Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
233 71  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work: \_\_\_\_\_ # Baths: 2  
Titans Telephone: 919-615-1947  
Plumbing Contractor's Company Name: \_\_\_\_\_  
Raleigh, NC Telephone: admin@titansservice.com  
Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
34800  
License # \_\_\_\_\_

**Insulation Contractor Information**

Tatum Telephone: 919-661-0999  
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.**

Amanda Allen JA  
Signature of Owner/Contractor/Officer(s) of Corporation

11.4.24  
Date

**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: Amanda Allen Date: 11.4.24