



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

* 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: BVA Enterprises Date 11-18-24
Site Address: 0 Rainbow Dr Dunn, NC 28334 Phone 919-520-2181
Subdivision: N/A Lot N/A
Description of Proposed Work: New Construction/SFH Total Job Cost \$130,000

General Contractor Information

BVA Builders 919-520-2181
Building Contractor's Company Name Telephone
1300 Benson Rd St 110 Garner, NC 27529 aford@vfgrealty.com
Address Email Address
L.79542 HEATED SQ FT 1064 GARAGE SQ FT N/A
License #

Electrical Contractor Information

Description of Work Electrical Rough in and Trim out Service Size: < 200 Amps T-Pole: ___ Yes X No
RA Jackson Electric 919-894-5367
Electrical Contractor's Company Name Telephone
9261 Raleigh Rd aford@vfgrealty.com
Address Email Address
Sp.SFD.21144
License #

Mechanical/HVAC Contractor Information

Description of Work Mechanical Rough in and Trim out
Carolina Comfort Air 919-367-3818
Mechanical Contractor's Company Name Telephone
PO Box 190 Clayton NC 27528 aford@vfgrealty.com
Address Email Address
L.31589
License #

Plumbing Contractor Information

Description of Work Plumbing rough in and trim out # Baths 2
Integra Plumbing 919-622-9102
Plumbing Contractor's Company Name Telephone
3805 Horsemint Tr Zebulon 27597 aford@vfgrealty.com
Address Email Address
L.31279
License #

Insulation Contractor Information

Tri City Insulation 7204 Becky Circle, Raleigh NC 27615 919-612-3636
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.

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

11-18-24
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: Julie Bailey / Project Coordinator Date: 11-18-24