



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

Owner's Name: Ayscue's Development, LLC Date: _____
Site Address: Lot 2, 0 Maye St. Dunn, NC Phone: 919-201-7066
Subdivision: _____ Lot: 2
Description of Proposed Work: Single family home Total Job Cost: \$320,000⁰⁰

General Contractor Information

Ayscue's Development, LLC 919-201-7066
Building Contractor's Company Name Telephone
834 Swift Creek Rd Smithfield, NC info@ayscues.com
Address Email Address
103839 HEATED SQ FT 1690 GARAGE SQ FT N/A (no garage)
License #

Electrical Contractor Information

Description of Work New residential Service Size: 200 Amps T-Pole: Yes No
Parnell Electric Service LLC 919-710-5230
Electrical Contractor's Company Name Telephone
11 Glenda Ln. Garner, NC 27529 jparnell@parnellelectric.com
Address Email Address
28143
License #

Mechanical/HVAC Contractor Information

Description of Work New Residential
Carolina Comfort Air, Inc. 919-550-7711
Mechanical Contractor's Company Name Telephone
5212 W-70 Bus. Hwy W. Clayton, NC jp@carolinacomfortair.com
Address Email Address
31589
License #

Plumbing Contractor Information

Description of Work New Residential # Baths 2
Ambit Plumbing 919-934-1379
Plumbing Contractor's Company Name Telephone
755 Rock Pilla Rd Clayton, NC ambitplumbing@gmail.com
Address Email Address
20823 27220
License #

Insulation Contractor Information


Garcia Insulation LLC (1720 Crookers Nub Rd.) 919-422-2765
Insulation Contractor's Company Name & Address Telephone
Middlesex, NC

*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.


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

12-3-24
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:

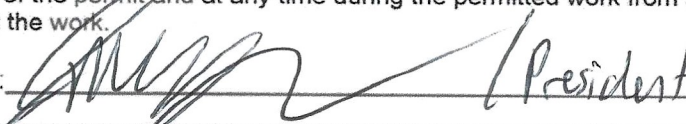
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  (President) Date: 12-3-24

