

Application #

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

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: FD Ra	aleigh		_Date	12/12/2024
Site Address: 178 0	Grove Township Way	Phone		
	on Preserve		15	
	d Work: New Single Family		\$313	3290
	General Contractor Information			
Clayton Properties Gro	up, Inc.	919-303-8525		
Building Contractor's Co		Telephone		
2521 Schieffelin Road,	Suite 116, Apex, NC 27502	VBerrios@mui	ngo.com	
Address		Email Address		
81396	HEATED SQ FT 2771 GARAGE S	Q FT 374		
License #				
Daniel Caractivitati	Electrical Contractor Information	o <u>n</u>	5.1. V V.	. NI.
	Electrical New Services Service Size:		Pole: X	esNo
Ogilvie Enterprises Inc.		919-427-8009		
Electrical Contractor's (	• •	Telephone		
5325 Hidwell PL, Apex I	NC 27539	russello@bellsouth.net		
Address		Email Address		
U.17046	_			
License #	Mechanical/HVAC Contractor Inforn	nation		
5		<u>liation</u>		
•	Mechanical New Services	040 440 0450	=	
Bowman Mechanical RI	·	919-413-3159		
Mechanical Contractor's		Telephone		
145 Technical Court, Ga	arner, NC 27529	nathanb@bowmanmechanicalservices.com		
Address		Email Address		
L34416	<u>_</u>			
License #				
	Plumbing Contractor Information	<u>on</u>		
Description of Work	Plumbing New Services	# Baths	2.5	
Titan's Plumbing, LLC		919-902-0990		
Plumbing Contractor's Company Name		Telephone		
PO Box 1045, Dunn, N	NC 28335	BryanCanales@Titansplumbing.com		
Address		Email Address		
34800				
License #	_			
	Insulation Contractor Information	<u>on</u>		
Insulated Building Produ	ıcts	919-608-8311		
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.

any and all changes.
<b>EXPIRED PERMIT FEES</b> - 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  Date
Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:
The undersigned applicant being the.
General Contractor Owner Officer/Agent of the Contractor or Owner
Do beroby confirm under penaltics of perjury that the person(s) firm(s) or corporation(s) performing the work
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:
Sectional in the permit.
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.
Lieu and (4) as made as beauty attacked and has abtained sources, agree and time income as to accome
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.
rido no more than two (2) employees and no substitutions.
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.
our fing out the north.
Sign w/Title: Date: