



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: FD Raleigh Date 01/06/2025

Site Address: 157 Grove Township Way Angier NC 27501 Phone _____

Subdivision: Langdon Preserve Lot 12

Description of Proposed Work: New Single Family Total Job Cost \$296,413

General Contractor Information

Clayton Properties Group, Inc. 99-303-8525

Building Contractor's Company Name Telephone

2521 Schieffelin Road, Suite 116, Apex, NC 27502 VBerrios@mungo.com

Address Email Address

81396 HEATED SQ FT 2236 GARAGE SQ FT 410

License # _____

Electrical Contractor Information

Description of Work Electrical New Services Service Size: 600 Amps T-Pole: X Yes No

Tool Time Services, Inc. 919-977-1408

Electrical Contractor's Company Name Telephone

447 Cleveland Crossing Dr, Suite 104, Garner, NC 7529 jimwandland.tts@gmail.com

Address Email Address

30306

License # _____

Mechanical/HVAC Contractor Information

Description of Work Mechanical New Services

Bowman Mechanical RDU, LLC 919-413-3159

Mechanical Contractor's Company Name Telephone

145 Technical Court, Garner, NC 27529 nathanb@bowmanmechanicalservices.com

Address Email Address

L34416

License # _____

Plumbing Contractor Information

Description of Work Plumbing New Services # Baths 3

Titan's Plumbing, LLC 919-902-0990

Plumbing Contractor's Company Name Telephone

PO Box 1045, Dunn, NC 28335 BryanCanales@Titansplumbing.com

Address Email Address

34800

License # _____

Insulation Contractor Information

Insulated Building Products 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.

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.

Victor Beniss

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

1/6/25

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: *Victor Beniss Operations*

Date: *1/6/25*