

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	01/06/2025	
Site Address:	139 Grove Township Way Angie	r NC 27501	Phone	·		
Subdivision: Langdon Preserve			Lot11			
Description of Proposed Work: New Single Family			_ Total Job Cost <del>\$319,298</del>			
	General Contract					
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 2844	GARAGE SC	<b>FT</b> 412			
License #						
Desided as Made	Electrical Contract	tor Information	<u>1</u>	Dala V Va	. NI.	
•	Electrical New Services	_ Service Size: _		· · · · · · · · · · · · · · · · · · ·	sN0	
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 Co	ntractor Inform	ation			
Description	<u>-</u>	ntractor imorni	<u>ation</u>			
	Mechanical New Services		040 442 2450	_		
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	<del>_</del>					
License #	Plumbing Control	star Information	•			
	Plumbing Contract	tor information	<del></del>			
Description of Work	Fluitibility 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 Contrac	ctor Informatio	<u>n</u>			
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.

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: