

Application #	
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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.

Viust be owner/occupier or licensed contractor. Address, company name & phone must match name & p

Application for Residential Building and Trades Permit

Address, company	Application for Residential Building and	118003 1 0 1 1 2
hone must match		Date: 210/25
n on license. Owner's Name: Adams	Hommes AEC, LLC	Phone: 919-233-6747
	Sunburst Ct.	
Site Address: The Paces	Windling Creek	Lot: Total Job Cost: \$250,000.00
Subdivision: ne races	d Work: Single Family Dwelling	Total Job Cost. 3235,500 5
Description of Propose	General Contractor Information	on and an area
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Adams Homes AEC LLC	- Nome	Telephone
Building Contractor's C	tompany Name	naikighrennins@adamshomes.com
149 US Hwy 70 W. Games	T, NC 11323	Email Address
Address 59785	HEATHERSON 1830 BARAGE	10 sit 474
License #	Electrical Contractor Informat	ion : 2000) Amps T-Pole: X Yes No
Description of Work	Single Family Home Service Size	919-369-785/2
Venres		Telephone
Electrical Contractor's	Company Name	Reannselle atricals eraine@gmail.com
Garner, NC		Email Address
Address		
22899	_	
License #	Mechanical/HVAC Contractor Info	rmation
Description of Work 1	nstal HVAC	704-882-4522. Telephone Lbyrd@carimechanicals.com Email Address
22084	_	
License #	Plumbing Contractor Informat	tion -
		# Baths
Description of Work		9 19:6115:19:47
Titons		Telephone
Plumbing Contractor's Ga	AND MEDIA TARANGE	admin@bitamsservice com
Raleigh, NC		Email Address
Address		
34800		tion
License #	Insulation Contractor Informa	9 119 - 66:1 - 0999
Tatum		Telephone
Insulation Contractor's	Company Name & Address	·
moulation 50.		

*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.

Amanda Allen

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

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
General Contractor OwnerX 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:		
X 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: 40125		