



Application #

Initial Application Date: <u>2/14/25</u>

				01111	
Central Permitting			Phone: (910) 893-7525 ext:1	CATION	www.harnett.org/permits
**A RECORDED SU	IRVEY MAP, RECORDED DEED	(OR OFFER TO PUF	CHASE) & SITE PLAN ARE REQUIRE	D WHEN SUBMITTING A LAI	ND USE APPLICATION**
LANDOWNER: LGI HO	mes		Mailing Address: 1450 La	ke Robbins Drive	e Ste 430
					udson@lgihomes.com
io 4	nms				
APPLICANT*: /(4) 1)	Olica	Mailing Add	ress:		
City: *Please fill out applicant inform	State: nation if different than landowne	Zip:	Contact No:	Email:	
ADDRESS:376 CM	eduath pric	, 17,045%	Contact No:		
Zoning:Floo	d: Watershe	d: Dee	ed Book / Page:		
Setbacks – Front:	Back: Side:_	Corner:			
PROPOSED USE:					Monalithia
			t(w/wo bath): Garage:		Name of the second seco
TOTAL HTD SQ FT 1172	GARAGE SQ FT 400 (	s the bonus room	finished? () yes () no w/ a	closet? () yes () no	o (if yes add in with # bedrooms)
			nent (w/wo bath) Garage:_ ned? () yes () no    Any ot		
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)					
☐ Duplex: (Sizex	() No. Buildings:	No.	Bedrooms Per Unit:	TOTAL HTD	SQ FT
☐ Home Occupation: #	Rooms:U	se:	Hours of Operation:_		#Employees:
☐ Addition/Accessory/C	Other: (Sizex)	Use:		Closets in a	addition? () yes () no
TOTAL HTD SQ FT	GARAGE		_		
Sewage Supply: Ne	ew Septic Tank Expan	(Need to Consider	# of dwellings using well complete New Well Application at cionExisting Septic Tank \( \subseteq \) e of application if Septic) I home within five hundred feet (	the same time as New Ta County Sewer	ank)
Does the property contain	any easements whether un	nderground or ove	rhead ( <u>√</u> ) yes ( <u></u> ) no		
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):					
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.					
/a	Oliver Signature of Owne	Hudson	ent	<u>8/14/25</u>	
***It is the owner/applic			vith any applicable information	about the subject prop	erty, including but not limited

to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\*

\*This application expires 6 months from the initial date if permits have not been issued\*\*

## **APPLICATION CONTINUES ON BACK**

strong roots · new growth



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

## Application for Residential Building and Trades Permit

Owner's Name: LGI Homes	Date 2/14/25
Site Address: 376 Charles And Drue, Andrew 6	0750\ Phone 919-520-8406
Subdivision: Atherstone	Lot )94
Description of Proposed Work: New Construction	Total Job Cost \$ 125,000
LGI Homes General Contractor Information	,
Building Contractor's Company Name 1450 Lake Robbins Dr. Ste 430, The Woodlands, TX 77380	919-520-8406 Telephone oliver.hudson@lgihomes.com
Address	Email Address
74803 License #	國 400
Description of Work New Construction Information  Description of Work New Construction Service Size:  Electrical Contractor's Company Name  103 Fluming St., Charlemony NC 27522  Address 20935  License #	Amps T-Pole:YesNo OIQ-(447-1400 Telephone 1-Crovotreun C Oyonob : Com Email Address
Mechanical/HVAC Contractor Informa	ation
Description of Work  Cary   McChanical  Mechanical Contractor's Company Name  5910 Stockbridge Dr., Monnoe NC 28110  Address  Loug 7-	774-882-4522 Telephone 1byrd@Cluy/methanicals.com Email Address
License #  Plumbing Contractor Information	n
Description of Work New Construction  Titon's Plumbing  Plumbing Contractor's Company Name  PO BOX 1045, DWN NC 28335  Address  34800  License #	# Baths
Insulation Contractor Informatio  Insulation Contractor's Company Name & Address	n 919-661-0999 Telephone

"NOTE: General Contractor I 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

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: Land In - Regional Construction Many RDate: 219125					