

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: Cambridge Reserve Developers, LLC		Date 2-	<u>20-2025</u>
Site Address: 132 Sagamore AvenueAngier, NC 27501Harnett County	Phone		
Subdivision: Cambridge Reserve	Lot	28	
Description of Proposed Work: New Single Family	Total Job Cost	\$300,09	98
General Contractor Information	n		
Clayton Properties Group, Inc.	919-303-852	5	
Building Contractor's Company Name	Telephone		
2521 Schieffelin Road, Suite 116, Apex, NC 27502	VBerrios@mungo.com		
Address	Email Address		
81396 HEATED SQ FT 2771 GARAGE S	OQ FT 374		
License #	<u> </u>		
Description of Work <u>Electrical New Services</u> Service Size	on 	Polo: Y Voc	No
		ole^_tes_	INO
Ogilvie Enterprises Inc. Electrical Contractor's Company Name	919-427-8009 Telephone		
5325 Hidwell PL, Apex NC 27539	russello@bellsou	ıth net	
Address	Email Address		
U.17046	Liliali Address		
License #			
Mechanical/HVAC Contractor Infor	mation_		
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@bowma	nmechanicals	ervices.com
Address	Email Address		
L34416			
License #			
Plumbing Contractor Informati	<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, NC 28335	BryanCanales@Titansplumbing.com		.com
Address	Email Address		
34800			
License #			
Insulation Contractor Informati	<u>OII</u>		
Insulated Building Products	919-608-8	311	<u>_</u>
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 berrios

victor perrios	2-20-2025			
Signature of Owner/Contractor/Officer(s) of Corporation	Date			
Affidavit for Worker's Compe	ensation N.C.G.S. 87-14			
The undersigned applicant being the:				
General Contractor Owner X C	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 obtathem.	ined workers' compensation insurance to cover			
Has one (1) or more subcontractors(s) who has their covering themselves.	r own policy of workers' compensation insurance			
Has no more than two (2) employees and no subcor	ntractors.			
While working on the project for which this permit is sought Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitt carrying out the work.	overage of worker's compensation insurance prior			
Sign w/Title: Victor berrios	Date: <u>2-20-2025</u>			