

Harnett
COUNTY

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

* Each section below to be filled out by whomever performing work. Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Owner's Name:

Adams Homes AEC, LLC

Site Address:

41 DECATOR DR.

Subdivision:

THE PRESERVE AT KILPIN CREEK

Description of Proposed Work:

NEW SINGLE FAMILY HOME

Total Job Cost: \$50,000.00

Lot: 3

Phone:

919-833-6747

Date:

7/18/2015

General Contractor Information

Adams Homes AEC, LLC

919-833-6747

Building Contractor's Company Name

149 US HWY 70 W. Garner, NC 27529

Email Address

raleighpermits@adamshomes.com

License #

59785

Description of Work

KEARNS ELECTRICAL

Electrical Contractor's Company Name

GARNER, NC

Email Address

22899

License #

Mechanical/HVAC Contractor Information

Description of Work

CARI MECHANICALS

Mechanical Contractor's Company Name

RALEIGH, NC

Email Address

22084

License #

Description of Work

Titans

Baths

919-902-0990

Telephone

Email Address

34800

License #

TRI-CITY

Insulation Contractor Information

Insulation Contractor's Company Name & Address

Telephone

919-790-9684

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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KC003



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.

Amarda Allen

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

7/23/25.

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:

Amarda Allen

Date:

7/23/25.