

\* 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: DAVID + KELLY MARIE ZAMORA	Date 3 18 25
Site Address: 4275 SPRING HILL CHURCH ROAD, LILLINGTO	N Phone (10) 580 - 5839
Subdivision: N A	Lot
Description of Proposed Work: NEW CRANLSPACE SFD	Total Job Cost \$546, 024.36
General Contractor Information	
VUNCAMNON + SONS BUILDERS, INC.	(919) 255-8537
Building Contractor's Company Name	Telephone
112 STRICKLAND LANE, LILLINGTON, NC 27546 ZV	NC@VUNCANNONANDSONSBUILDERSINC. COI Email Address
US5590 HEATED SQ FT 3102 GARAGE S	QFT 915
Electrical Contractor Information	
Description of Work 2014-IN TRIM-OUT Service Size	
A AND J ELECTRICAL, LLC Electrical Contractor's Company Name	(919) 616-9632 Telephone
3790 CHRISTIAN LIGHT ROAD, FURVAY-VARINA, NC Address 27526	D-PoPEI9@GMAIL.Com Email Address
L. 30755	
License #  Mechanical/HVAC Contractor Infor	mation
Description of Work ROUGH-IN & TRIM-OUT	
RANDY LEE JACKSON	(910) 242-2941
Mechanical Contractor's Company Name	Telephone
1113 WARREN ROAD, ERWIN, NC 28339 Address	Email Address
1.18512	
License #	t
Plumbing Contractor Informati	
Description of Work ROUGH-IN + TRIM-OUT	# Baths3
Plumbing Contractor's Company Name	(919) 709 - 7853 Telephone
156 1215 BEYANT ROAD, ERWIN, NC 28339 Address	DUSTING KENWEST PLUMBING. COM Email Address
L.08252 License #	
Insulation Contractor Informat	ion
Insulation Contractor's Company Name & Address 28306	( <u>910) 486 - 8855</u> 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.

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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

3 18 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: Date: 3/18/25		