



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.harnett.org/permits

* Must be owner/occupier or
licensed contractor. Address,
company name & phone must
match information on license.

Application for Residential Building and Trades Permit

Owner's Name: ICG Homes, LLC Date 3/20/2025
Site Address: 253 Inspiration Way Fuquay-Varina, 27526 Phone 919-876-5802
Subdivision: Serenity Lot 314
Description of Proposed Work: _____ Total Job Cost 600,000

General Contractor Information

ICG Homes, LLC 919-876-5802
Building Contractor's Company Name Telephone
4020 Wake Forest Rd. Ste.306; Raleigh, NC 27609 permits@icghomes.com
Address Email Address
73533 **HEATED SQ FT** 3069 **GARAGE SQ FT** 1076
License #

Electrical Contractor Information

Description of Work Whole house electrical Service Size: 200 Amps T-Pole: X Yes ___ No
AKE Electric 919-367-6100
Electrical Contractor's Company Name Telephone
1012 Investment Blvd Apex, NC 27502 akeelectricinc@gmail.com
Address Email Address
31732
License #

Mechanical/HVAC Contractor Information

Description of Work Whole house mechanical
Reliable Home Solutions, LLC 919-306-2059
Mechanical Contractor's Company Name Telephone
829 Purser Drive #A Raleigh, NC 27603 josh@reliableheatandair.com
Address Email Address
33797
License #

Plumbing Contractor Information

Description of Work Whole house plumbing # Baths 4
Cutchins Plumbing Inc. 919-366-3000
Plumbing Contractor's Company Name Telephone
5030 Wendell Blvd Wendell, NC 27591 cutchinsplumbing@yahoo.com
Address Email Address
6722
License #

Insulation Contractor Information

Live Green - 5001 Old Poole Rd, Raleigh, 27610 919-453-6411
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.

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

3/20/2025

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: Darin Mills Date: 3/20/2025