

		Application #
e owner/occupier or contractor. Address, y name & phone must formation on license.	Harnett County Centra 420 McKinney Pkwy Lilling PO Box 65 Lillington, 910-893-7525 ext. 1 Fax 910-893-279	gton, NC 27546 NC 27546 93 www.harnett.org/permits
	Application for Residential Build	ding and Trades Permit
Owner's Name: <u>Clayton Properties Group, Inc</u> .		Date 3/24/2025
Site Address: <u>54 Sagamore Avenue Angier NC 27501</u>		
Subdivision: Cambridge Reserve		
Description of Proposed Work: <u>New Single Family</u>		
	General Contractor I	
Clayton Properties Gro		919-303-8525
Building Contractor's Company Name		Telephone
2521 Schieffelin Road, Suite 116, Apex, NC 27502		VBerrios@mungo.com
Address		Email Address
81396	HEATED SQ FT 2574	GARAGE SQ FT 431
License #		
Description of Work	Electrical Contractor	<u>Information</u> ervice Size: <u>600</u> Amps  T-Pole: <u>X</u> Yes <u> </u> No
		919-427-8009
Ogilvie Enterprises Inc. Electrical Contractor's Company Name		Telephone
5325 Hidwell PL, Apex NC 27539		russello@bellsouth.net
Address		Email Address
Address U.17046		Email Address
	_	Email Address
U.17046	 Mechanical/HVAC Contra	
U.17046 License #		
U.17046 License #	Mechanical New Services	
U.17046 License # Description of Work	Mechanical New Services DU, LLC	actor Information
U.17046 License # Description of Work Bowman Mechanical RI	Mechanical New Services DU, LLC s Company Name	<u>ector Information</u> <u> 919-413-3159</u> Telephone
U.17046 License # Description of Work Bowman Mechanical RI Mechanical Contractor's	Mechanical New Services DU, LLC s Company Name	<u>ector Information</u> <u> 919-413-3159</u> Telephone
U.17046 License # Description of Work Bowman Mechanical RI Mechanical Contractor's 145 Technical Court, Ga	Mechanical New Services DU, LLC s Company Name	actor Information         919-413-3159         Telephone         nathanb@bowmanmechanicalservices.
U.17046 License # Description of Work Bowman Mechanical RI Mechanical Contractor's 145 Technical Court, Ga Address	Mechanical New Services DU, LLC s Company Name arner, NC 27529	ector Information         919-413-3159         Telephone         nathanb@bowmanmechanicalservices.         Email Address
U.17046 License # Description of Work Bowman Mechanical RI Mechanical Contractor's 145 Technical Court, Ga Address L34416 License #	Mechanical New Services DU, LLC s Company Name arner, NC 27529 Plumbing Contractor	ector Information         919-413-3159         Telephone         nathanb@bowmanmechanicalservices.         Email Address
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U.17046 License # Description of Work Bowman Mechanical RI Mechanical Contractor's 145 Technical Court, Ga Address L34416 License # Description of Work Titan's Plumbing, LLC Plumbing Contractor's (	Mechanical New Services DU, LLC s Company Name arner, NC 27529 Plumbing Contractor Plumbing New Services Company Name	ector Information         919-413-3159         Telephone         nathanb@bowmanmechanicalservices.         Email Address         Information         # Baths       3         919-902-0990         Telephone
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\*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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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

3-24-2025 Date

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 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:

 $\frac{1}{2}$  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:	Victor berrios	Date: 3-24-2025
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