



Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* 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.

Application for Residential Building and Trades PermitOwner's Name: David Graham Date 4-8-25Site Address: TBD Graham Mills Lane Phone 910-745-0001Subdivision: Graham Mills Lane Minor Lot 8Description of Proposed Work: Single Family Residential Total Job Cost 327,577.00**General Contractor Information**Onsite Homes, LLC.910-745-0001

Building Contractor's Company Name

Telephone

2391 Breezewood Ave. Ste. 202 Fay, NC 28303LeannaHair@Onsitehomesnc.com

Address

Email Address

73671-U**HEATED SQ FT** 3900**GARAGE SQ FT** 818

License #

Electrical Contractor InformationDescription of Work Electrical Service Size: 200 Amps T-Pole: ☒ Yes ☐ NoJ.M. Pope Electric910-890-3655

Electrical Contractor's Company Name

Telephone

409 Chatham Street Sanford, NC 27330MarshallPope74@gmail.com

Address

Email Address

21326L

License #

Mechanical/HVAC Contractor InformationDescription of Work HVACCertified Heating & Air910-858-0000

Mechanical Contractor's Company Name

Telephone

PO Box 1071 Hope Mills, NC 28348ehrin.certified@gmail.com

Address

Email Address

20012

License #

Plumbing Contractor InformationDescription of Work Plumbing# Baths 3.5Titan Plumbing Company919-902-0990

Plumbing Contractor's Company Name

Telephone

1634 Brook Fern Way Raleigh, NC 27609Business@titansplumbing.com

Address

Email Address

34800

License #

Insulation Contractor InformationTricity Insulation & Bldg 334 E Mountain Dr. Fay, NC 28306910-486-8855

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.

Holly Wingard / Onsite Homes LLC
Signature of Owner/Contractor **Officer(s)** of Corporation

4-8-25
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

 General Contractor Owner XX 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:

XX 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.

XX 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: Holly Wingard / Permitting Coordinator Date: 4-8-25