



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: Clayton Properties Group, Inc. Date 5/7/2025Site Address: 88 Osgood Street Angier NC 27501 Phone \_\_\_\_\_Subdivision: Cambridge Reserve Lot 17Description of Proposed Work: New Single Family Total Job Cost \$ 290,191**General Contractor Information**Clayton Properties Group, Inc. 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 2844 GARAGE SQ FT 412

License #

**Electrical Contractor Information**Description of Work Electrical New Services Service Size: 600 Amps T-Pole: X Yes \_\_\_ NoOgilvie Enterprises Inc. 919-427-8009

Electrical Contractor's Company Name Telephone

5325 Hidwell PL, Apex NC 27539 russello@bellsouth.net

Address Email Address

U.17046

License #

**Mechanical/HVAC Contractor Information**Description of Work Mechanical New ServicesBowman Mechanical RDU, LLC 919-413-3159

Mechanical Contractor's Company Name Telephone

145 Technical Court, Garner, NC 27529 nathanb@bowmanmechanicalservices.com

Address Email Address

L34416

License #

**Plumbing Contractor Information**Description of Work Plumbing New Services # Baths 2.5Titan's Plumbing, LLC 919-902-0990

Plumbing Contractor's Company Name Telephone

PO Box 1045, Dunn, NC 28335 BryanCanales@Titansplumbing.com

Address Email Address

34800

License #

**Insulation Contractor Information**Insulated Building Products 919-608-8311

Insulation Contractor's Company Name &amp; 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.**

*Victor berrios*

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

*5/7/2025*

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: *Victor berrios* Date: *5/7/2025*