



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 PermitOwner's Name: BVA Builders Date 05/29/25Site Address: 131 Dauphine St Fuquay-Varina NC Phone 919-520-2181Subdivision: Captains Landing Lot Block 7, Lot 64Description of Proposed Work: New Construction/SFH Total Job Cost 130,000**General Contractor Information**BVA Builders 919-333-3499Building Contractor's Company Name Telephone1300 Benson Rd Garner NC 27529 aford@vfgrealty.comAddress Email AddressL.79542 HEATED SQ FT 1064 GARAGE SQ FTLicense #**Electrical Contractor Information**Description of Work Electrical Rough in/Trim out. New Construction/SFH Service Size: ≤ 200 Amps T-Pole: X Yes NoCurrent Power Solutions, Inc. 919-625-3543/919-345-0450Electrical Contractor's Company Name Telephone918 Greenwood Circle Cary NC 27511 aford@vfgrealty.comAddress Email AddressU18755License #**Mechanical/HVAC Contractor Information**Description of Work Mechanical rough in/ Mechanical trim out New Construction/SFHCarolina Comfort Air 919-219-1061Mechanical Contractor's Company Name Telephone5212 US-70 BUS Clayton NC 27520 rnc_permits@carolinacomfortair.comAddress Email AddressL.31589License #**Plumbing Contractor Information**Description of Work Plumbing rough in/trim out New Construction/SFH # Baths 2Thornton's Plumbing 919-550-4833Plumbing Contractor's Company Name Telephone3160A Vinson Rd Clayton NC 27527 tpiplanner@gmail.comAddress Email AddressL 22152License #**Insulation Contractor Information**Tri-City Insulation 7204 Becky Cir Raleigh NC 27615 919-790-9684Insulation 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.

Anna B. Ford/Agent of Owner

05/29/25

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

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: **Anna B. Ford/Agent of Owner** Date: **5.29.2025**