

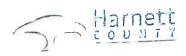
Application #	Application #	
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\* Each section below to be filled out by whomever performing work Must be owner occupier or licensed contractor. Address company name & phone must match Harnett County Central Permitting
PO 80x 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www harnett.org/permits

## Application for Residential Building and Trades Permit

none must match n on license.	7.1150.116	Date 14 15   a S
Owner's Name DREAM	FINDERS HOMES, LLC	Phone 910-486-4864 ext 21423
Site Address 219	Steeple Ridge	
Subdivision: The CO	iony@Lexington Plantation	Total Job Cost 225,838
Description of Proposec	Work SFD	Total 30b cost strain
	General Contractor Informa	910-486-4864 ext 21423
DREAM FINDERS HOME		
Building Contractor's Company Name 14701 PHILIPS HWY SUITE 30 JACKSONVILLE FLA 32256		mackenziewesteareamfinaers
Address 99501	a844 maga	Email Address 430
License #	Electrical Contractor Informa	ation
Description of Work Res	Conuco SI	ze <u>zuu Amps i i die AAZ</u>
JM POPE ELECTRICAL L	LC	919-776-5144 Talanhana
Electrical Contractor's C	Company Name	Telephone  ELECTRICPOPE@WINDSTREAM NET
409 CHATHAM ST S	ANFORD NC 27330	Email Address
Address 21326	-:	
	Mechanical/HVAC Contractor Inf	formation
21326 Licerse #	Mechanical/HVAC Contractor Inf	
21326 License # Description of Work Re		919-934-1060
21326 License #  Description of Work Re  Carolina Comfort Air	esidential	
21326 License # Description of Work Re Carolina Comfort Air Mechanical Contractor's	esidential s Company Name	919-934-1060 Telephone
21326 License #  Description of Work Re  Carolina Comfort Air	esidential s Company Name	919-934-1060
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine	esidential s Company Name	919-934-1060 Telephone
21326 License # Description of Work Re Carolina Comfort Air Mechanical Contractor's 5212 US Hwy 70 Busine Address	esidential  S Company Name  SSS Clayton NC 27520	919-934-1060 Telephone Email Address
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine  Address 29077  License #	esidential  S Company Name  Ess Clayton NC 27520  Plumbing Contractor Inform	919-934-1060 Telephone Email Address  # Baths
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine  Address 29077  License #  Description of Work Re	esidential s Company Name ess Clayton NC 27520 Plumbing Contractor Inform esidential	919-934-1060 Telephone  Email Address  action # Baths 919-902-0990
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine  Address 29077  License #  Description of Work Re TITAN'S PLUMBING C	esidential  S Company Name  Ess Clayton NC 27520  Plumbing Contractor Inform  esidential  COMPANY	919-934-1060 Telephone Email Address  # Baths
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine  Address 29077 License #  Description of Work Re TITAN'S PLUMBING C	esidential  S Company Name  Ess Clayton NC 27520  Plumbing Contractor Inform  esidential  COMPANY	919-934-1060 Telephone  Email Address  # Baths 919-902-0990 Telephone
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine  Address 29077  License #  Description of Work Re TITAN'S PLUMBING C	esidential  S Company Name  Ess Clayton NC 27520  Plumbing Contractor Inform  esidential  COMPANY	919-934-1060 Telephone  Email Address  action # Baths 919-902-0990
21326 License #  Description of Work Re Carolina Comfort Air Mechanical Contractor's 5212 US Hwy 70 Busine Address 29077 License #  Description of Work Re TITAN'S PLUMBING C Plumbing Contractor's C	esidential  S Company Name  Ess Clayton NC 27520  Plumbing Contractor Inform  esidential  COMPANY	919-934-1060 Telephone  Email Address  # Baths 919-902-0990 Telephone
21326 License #  Description of Work Re Carolina Comfort Air  Mechanical Contractor's  5212 US Hwy 70 Busine  Address 29077 License #  Description of Work Re TITAN'S PLUMBING C  Plumbing Contractor's ( PO BOX 1045  Address	esidential  S Company Name  Ess Clayton NC 27520  Plumbing Contractor Inform  esidential  COMPANY	919-934-1060 Telephone  Email Address  # Baths 919-902-0990 Telephone  Email Address

\*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

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue ree is \$150.00. After 2 years re-issue ree is as per current fee schedule. <u>U|5|25</u>

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

Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersigned applicant being the.
X General Contractor — Owner X 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.
X 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
X 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 Mackungu Sconard permitting Coordinator Date USISS