KC007.

Harnett COUNTY

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 Permit

Owner's Name: Adams Homes AEC, LLC Date: 11/10/25.

Site Address: 101 Decatur Dr. Phone: 919-233-6747

Subdivision: THE PRESERVE AT KIPLING CREEK Lot: 7

Description of Proposed Work: New Single family home Total Job Cost: 250,000.00

General Contractor Information

Adams Homes AEC, LLC — 919-233-6747
Building Contractor's Company Name — Telephone

149 US HWY 70 W. Garner, NC 27529 — raleighpermits@adamshomes.com
Address — Email Address

59785 HEATED SQFT 2032 CONDITIONED SQFT 4/10.
License #

Electrical Contractor Information

Description of Work _____ Service Size: 200 Amps T-Pole: X Yes ___ No

KEARNS ELECTRICAL — 919-369-7852
Electrical Contractor's Company Name — Telephone

GARNER, NC — _____
Address — Email Address

22899
License #

Mechanical/HVAC Contractor Information

Description of Work _____

TOP Level Comfort — 919-980-0722.
Mechanical Contractor's Company Name — Telephone

Sanford, NC — _____
Address — Email Address

36959
License #

Plumbing Contractor Information

Description of Work _____ # Baths 2.

Titans — 919-902-0990
Telephone

Raleigh, NC — _____
Address — Email Address

34800
License #

Insulation Contractor Information

Tatum — 919-601-0999
Insulation Contractor's Company Name & Address — Telephone

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

Harnett COUNTY

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.

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

10/16/25
Date

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

The undersigned applicant being the:

_____ 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.

_____ 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: Amanda Allen Date: 10/16/25