



strong roots • new growth

CentralPermitting@Harnett.org  
(910) 893-7525 ext:1  
420 McKinney Pkwy (physical)  
PO Box 65 (mailing)  
Lillington, NC 27546

## RESIDENTIAL BUILDING APPLICATION

Site Address: Old Stage Rd N, Angier NC 27501 PIN: 0092-08-0954  
Owner: Salvador Trejo Mejia Phone: 919-413-5246 Email: Salvadortrejo078@icloud.com  
Description of Proposed Work: New house : garage Total Job Cost: \$200,000

### GENERAL CONTRACTOR INFORMATION

\* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Salvador Trejo - Owner  
General Contractor's Company Name  
38 Margies Ln Angier NC 27501  
Address

919-413-5246  
Phone  
Salvadortrejo078@icloud.com  
Email

License # \_\_\_\_\_

### ELECTRICAL CONTRACTOR INFORMATION

Description of Work: New Electrical  
Salvador Trejo - Owner  
Electrical Contractor's Company Name  
38 Margies Ln Angier NC 27501  
Address

Service Size: 200 Amps T-Pole: YES ☒ NO ☐

919-413-5246  
Phone  
Salvadortrejo078@icloud.com  
Email

License # \_\_\_\_\_

### MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: New HVAC  
Salvador Trejo - Owner  
Mechanical Contractor's Company Name  
38 Margies Ln Angier NC 27501  
Address

919-413-5246  
Phone  
Salvadortrejo078@icloud.com  
Email

License # \_\_\_\_\_

### PLUMBING CONTRACTOR INFORMATION

Description of Work: New Plumbing  
Salvador Trejo - Owner  
Plumbing Contractor's Company Name  
38 Margies Ln Angier NC 27501  
Address

# of Fixtures: \_\_\_\_\_

919-413-5246  
Phone  
Email

License # \_\_\_\_\_

### INSULATION CONTRACTOR INFORMATION

Salvador Trejo - Owner  
Insulation Contractor's Company Name

919-413-5246  
Phone

APPLICATION CONTINUES ON BACK



I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

**EXPIRED PERMIT FEES** - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Salvador Trejo Mejia

Signature of Owner/Contractor/Officer of Corporation

6/24/25

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

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

☐ Has 3 or more employees and has obtained workers' compensation insurance to cover them,

☒ Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

☒ Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

☐ Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

Salvador Trejo Mejia

Signature of Owner/Contractor/Officer of Corporation

6/24/25

Date