

Application #

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

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

## **Application for Residential Building and Trades Permit**

Owner's Name: FD Raleigh Inc	Date <u>7/15/2025</u>
Site Address: 174 Harriette Court Lillington NC 27546	
Subdivision: Leander Lee Preserve	Lot65
Description of Proposed Work: New Single Family	Total Job Cost <u>\$279,989.00</u>
General Contractor Inform	<u>nation</u>
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 2833 GARAG	GE SQ FT 412
License #	
Electrical Contractor Inform	mation
Description of Work Electrical New Services Service	
Ogilvie 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 #	nformation
Mechanical/HVAC Contractor I	mormation.
Description of Work Mechanical New Services	0.10,110,0150
Bowman 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 Inform	
Description of WorkPlumbing New Services	# Baths
Titan'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 Infor	<u>mation</u>
Insulated Building Products	919-608-8311
Insulation 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.

7/45/2025

Victor berrios

Signature of Owner/Contractor/Office	er(s) of Cor	poration	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 set forth in the permit:	of perjury th	at the pe	erson(s), firm(s) or corporation(s) performing the work
Has three (3) or more employ	yees and ha	ıs obtair	ned workers' compensation insurance to cover them.
Has one (1) or more subcont them.	ractors(s) a	nd has o	obtained workers' compensation insurance to cover
Has one (1) or more subcont covering themselves.	ractors(s) w	ho has t	their own policy of workers' compensation insurance
Has no more than two (2) em	nployees an	d no sub	bcontractors.
Department issuing the permit may	require cert	ificates o	ught it is understood that the Central Permitting of coverage of worker's compensation insurance prior rmitted work from any person, firm or corporation
Sign w/Title: Victor berri	os		Date: