



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 PermitOwner's Name: A&G Residential LLC Date: 10/10/2025Site Address: 309 Appaloosa Drive Spring Lake NC 28390 Phone: 910-779-0229Subdivision: Harnett Lakes Lot: 48Description of Proposed Work: _____ Total Job Cost: \$152295**General Contractor Information**A&G Residential LLC910-779-0229

Building Contractor's Company Name

Telephone

916 Arsenal Ave Suite B Fayetteville NC 28305anastasia@agresidentialinc.com

Address

Email Address

80672L**HEATED SQ FT** 1330**GARAGE SQ FT** 570

License #

Electrical Contractor InformationDescription of Work Single Family Electric Service Size: 200 Amps T-Pole: x Yes ___ NoJM Pope Electric910-890-3655

Electrical Contractor's Company Name

Telephone

409 Chatham Street Sanford NC 27330Marshallpope74@gmail.com

Address

Email Address

21326L

License #

Mechanical/HVAC Contractor InformationDescription of Work Single Family HVACCertified Heating & Air910-858-0000

Mechanical Contractor's Company Name

Telephone

PO Box 1071 Hope Mills NC 28348ehrin.certified@gmail.com

Address

Email Address

20012

License #

Plumbing Contractor InformationDescription of Work Single Family Plumbing # Baths 2Titans Plumbing919-902-0990

Plumbing Contractor's Company Name

Telephone

PO Box 1045 Dunn NC 28335business@titansplumbing.com

Address

Email Address

34800

License #

Insulation Contractor InformationTricity Insulation & Building Products910-486-8855

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.

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

10/10/2025

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.

 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: Anastasia Dailey - Construction Coordinator

Date: 10/10/2025