

RESIDENTIAL BUILDING APPLICATION

Site Address: 1507-01-6702 LOT 2 **PIN:** 1507-01-5328

Owner: Katherine Serrell **Phone:** 919-215-4218 **Email:**

Description of Proposed Work: Single family new home construction **Total Job Cost:** \$300,000

GENERAL CONTRACTOR INFORMATION

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

Mondragon Homes LLC
General Contractor's Company Name
314 Martin Luther King Jr Blv
Address
87049
License #
1 919-215-4218
Phone
Admin@mondragonhomes.com
Email

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Rough In / Trim out (New construction)
J & K Electric
Electrical Contractor's Company Name
2317 Brie Ct, Yadkinville 27055
Address
27649-U
License #
Service Size: 200 Amps T-Pole: YES ☒ NO ☐
336-331-2211
Phone
Jandkelectric1@gmail.com
Email

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Rough In / Trim out (New Construction)
MVP Heating & Cooling
Mechanical Contractor's Company Name
6408 Falconwood Dr Wendell NC , 27591
Address
36422
License #
252-230-6438
Phone
Email

PLUMBING CONTRACTOR INFORMATION

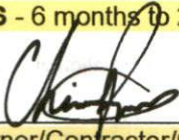
Description of Work: Rough / Trim out (New Construction) # of Fixtures: 10
Mascot Plumbing
Plumbing Contractor's Company Name
249 Mill Creek Drive , Clayton NC , 27527
Address
29885
License #
919-632-0441
Phone
Email

INSULATION CONTRACTOR INFORMATION

Tatum insulation
Insulation Contractor's Company Name
336-829-0587
Phone

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.



Signature of Owner/Contractor/Officer of Corporation

11/25/25

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:

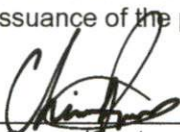
☐ Has 3 or more employees and has obtained workers' compensation insurance to cover them,

☐ 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.



Signature of Owner/Contractor/Officer of Corporation

11/25/25

Date