

## RESIDENTIAL BUILDING APPLICATION

**Site Address:** 1507-01-6702 LOT 6 **PIN:** 1507-01-8222  
**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** **1 919-215-4218**  
General Contractor's Company Name Phone  
314 Martin Luther King Jr Blv Admin@mondragonhomes.com  
Address Email  
87049  
License #

### ELECTRICAL CONTRACTOR INFORMATION

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

### MECHANICAL/HVAC CONTRACTOR INFORMATION

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

### PLUMBING CONTRACTOR INFORMATION

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

### INSULATION CONTRACTOR INFORMATION

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