

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: WBB ENTERPRISES, LLC Site Address: 5137 String Hill Church RD. L	Date 4-9-24
Site Address: 5137 String Hell Church RD. L	(Lingins) Phone 910-705-6536
	Lot
Description of Proposed Work: Build New Const. Hom	
General Contractor Information	
Tom NASH CONTRACTING, U.C. Building Contractor's Company Name	
Building Contractor's Company Name	Telephone
3632 Tule SBring ST. Phaleigh NC. 27610 Address	T. NASH. LLC @ GMAIL. Com Email Address
79955 HEATED SQ FT 1/120 GARAGE SQ	DFT 400
Electrical Contractor Information	
Description of Work Wile New Const. 1+046 Service Size:	
Electrical Contractor's Company Name	919 - 669 - 7209 Telephone
286 PIERCE IN. ELWIN NC 28339 Address	HPMAYNORTR@ GMAK. Com Email Address
24450	
License #	
Mechanical/HVAC Contractor Information	
Description of Work INSTILL 21/2 TON HEAT PUM	
Mechanical Contractor's Company Name	Telephone
Mechanical Contractor's Company Name 3632 Tule String STREET, Mileigh NC Address 27610	T. NASH. LLC & GMAIC, COM Email Address
39333	
License #	_
Plumbing Contractor Informatio	_
Description of Work INSTAU PLUMBING SYSTEM NEW COST.	
Plumbing Contractor's Company Name	Telephone
114 Lee CT. CLAYTON, NC 27520 Address	Email Address
27132	
License #	_
Insulation Contractor Informatio	_
Insulation Contractor's Company Name & Address	919 - 805 - 8539 Telephone
10228 DEBNAM RD.	. 5.55
*NOTE: General Contractor / owner must fill out and sign the s	second page of this application
note. General Contractor / Owner must mil out and sign the s	econd 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 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	
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:	
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.	
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: Phungfled (Tom NASH CONTINETING, UC) Date: 4-9-24	