



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 Permit**

Owner's Name: Willie Locklear Date: 05/28/2021

Site Address: 425 Buchanan Rd Phone: 919-946-1613

Subdivision: Louise Strickland Lot: 1

Description of Proposed Work: Fire restoration/rebuild Total Job Cost: \$80+

**General Contractor Information**

Starritt Restoration (919)397-0324  
Building Contractor's Company Name Telephone

114c Commerce Ct. rprather@servpro10849.com  
Address Email Address

82644 HEATED SQ FT 1762 GARAGE SQ FT 425  
License #

**Electrical Contractor Information**

Description of Work Electrical re-wiring Service Size: 200 Amps T-Pole:  Yes  No

Jim Burns (919)480-6177  
Electrical Contractor's Company Name Telephone

1525 Farrington Rd burnselectrical76@gmail.com  
Address Email Address

31400-U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work Replacing HVAC system

Hooah Heating and Air (919)586-6147  
Mechanical Contractor's Company Name Telephone

169 Country Folks Lane, Holly Springs, NC 27540 service@hooahheatingandair.com  
Address Email Address

33597  
License #

**Plumbing Contractor Information**

Description of Work Re-plumbing heat-affected pipes # Baths 2

Pipeworx (919)588-4498  
Plumbing Contractor's Company Name Telephone

PO Box 754, Sanford, NC 27331 office@mypipeworx.com  
Address Email Address

31056  
License #

**Insulation Contractor Information**

Starritt and Company (919)397-0324  
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

05/28/2021  
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:  Reconstruction Man    Date: 05/27/2021