



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: Gwendolyn & Sylvester Landrum Date: 1/3/23  
Site Address: 1014 Piney Grove Rawls Rd Phone: 404-669-9697  
Fuquay Varina NC 27526  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Remo / ADDITION Total Job Cost: 180 K

**General Contractor Information**

Gwendolyn Landrum Telephone: 404-669-9697  
Building Contractor's Company Name  
1014 Piney Grove Rawls Rd  
Address: Fuquay Varina NC 27526 Email Address: \_\_\_\_\_  
HEATED SQ FT \_\_\_\_\_ GARAGE SQ FT \_\_\_\_\_

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work: Change Amp Service Size: \_\_\_\_\_ Amps T-Pole: Yes No  
Barry Lewis Telephone: 919-980-0563  
Electrical Contractor's Company Name  
19430 NC 210 East Angier NC Email Address: \_\_\_\_\_  
Address: 18154-L  
License # \_\_\_\_\_

Permit Filed

**Mechanical/HVAC Contractor Information**

Description of Work: Heating & Air Conditioner Unit Installation  
Thermo Direct Telephone: 919-662-9868  
Mechanical Contractor's Company Name  
4901 Trademark Dr Raleigh NC Email Address: \_\_\_\_\_  
Address: Mech. Permit # MRES 27610  
2212-035  
License # Elect permit # MRES 2209-0074

Permit Filed

**Plumbing Contractor Information**

Description of Work: Plumbing Rough IN-TRIM OUT # Baths: 2  
Alonzo Wilson Telephone: \_\_\_\_\_  
Plumbing Contractor's Company Name  
PO Box 11573 Apex NC 27502 Email Address: \_\_\_\_\_  
Address: 523  
11573  
License # \_\_\_\_\_

**Insulation Contractor Information**

DMD House Flippers LLC Telephone: 919-418-2257  
Insulation Contractor's Company Name & Address

\*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.

*Dwendolyn B. Landrum*  
Signature of Owner/Contractor/Officer(s) of Corporation

1/3/23  
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: *Dwendolyn Landrum* Date: \_\_\_\_\_