



Harnett County Central Permitting
 PO Box 65 Lillington, NC 27546
 910-883-7325 Fax 910-883-2793 www.harnett.org/permits

Application # _____

* Each section below to be filled out by whomever performing work. Must be owner/contractor or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: PHYLLIS STECKLAND Date: 12-7-2012
 Site Address: 105 EAST D STREET Phone: 910-624-8943
 Subdivision: _____ Lot: 104-351-139
 Description of Proposed Work: REVISION HALL + FULL BATH Total Job Cost: 107,500

General Contractor Information

Building Contractor's Company Name: DJI CONSTRUCTION LLC # 91983 Telephone: 919-624-8943
 Address: 15 LAWL RD ANGLIER NC 27501 Email Address: _____
 License #: 91983 HEATED SQ FT: 504 GARAGE SQ FT: _____

Electrical Contractor Information

Description of Work: LIGHTS + GFI Service Size: _____ Amps T-Pole: _____ Yes _____ No
 Electrical Contractor's Company Name: PARKEYS ELECTRIC Telephone: 910-984-6810
 Address: 167 STONELHENGE DRIVE DUNN Email Address: _____
 License #: 31058

Mechanical/HVAC Contractor Information

Description of Work: MINI SPLIT W/
 Mechanical Contractor's Company Name: EASTERN TEMPERATURE CONTROL LLC Telephone: 910-237-2925
 Address: 12024 HARNETT DUNN HWY DUNN, NC Email Address: _____
 License #: 30556

Plumbing Contractor Information

Description of Work: BATH ROOM # Baths: 6
 Plumbing Contractor's Company Name: JACSSO PLUMBER Telephone: 910-990-0249
 Address: _____ Email Address: _____
 License #: 15727-P-1

Insulation Contractor Information

Insulation Contractor's Company Name & Address: DJI CONSTRUCTION Telephone: 919-624-8943
15 LAWL RD ANGLIER NC 27501

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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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]
Signature of Owner/Contractor/Officer(s) of Corporation

12/7/23
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.

Signature/Title: [Signature] GC

Date: 12/7/23