

Application # \_\_\_\_\_  
**Harnett County Central Permitting**

\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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](http://www.harnett.org/permits)  
Email [centralpermitting@harnett.org](mailto:centralpermitting@harnett.org)  
**Application for Residential Building and Trades Permit**

Owner's Name: Pamela Tatum \_\_\_\_\_

Date \_\_\_\_\_

Site Address: 159 Alice Holleman Ln Fuquay Varina NC 27526

Phone 919-427-5891

Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_

Description of Proposed Work: Add Detached Garage to existing Concrete Pad  
Total Job Cost 11,000.00

**General Contractor Information**

Building Contractor's Company Name \_\_\_\_\_

Telephone \_\_\_\_\_

Home owner - Pamela F. Tatum

Address \_\_\_\_\_

Email Address \_\_\_\_\_

HEATED SQ FT \_\_\_\_\_ GARAGE SQ \_\_\_\_\_

FT \_\_\_\_\_

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

**Electrical Contractor Information**

Description of Work \_\_\_\_\_

Service Size: \_\_\_\_\_

60 Amps T-Pole:  Yes  No

60 Amps

Electrical Contractor's Company Name \_\_\_\_\_

Telephone \_\_\_\_\_

COCKRELL'S ELECTRICAL (Bobby Cockrell)

Address 7204 Indian Rock Rd

Email Address \_\_\_\_\_

Wendell N.C. 27591

bcockrell427@gmail.com

License # L12829

**Mechanical/HVAC Contractor Information**

Description of Work NA  
\_\_\_\_\_  
\_\_\_\_\_

Mechanical Contractor's Company Name  
Telephone  
\_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License #

**Plumbing Contractor Information**

Description of Work NA #  
Baths  
\_\_\_\_\_  
\_\_\_\_\_

Plumbing Contractor's Company Name  
Telephone  
\_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

License #

**Insulation Contractor Information**

\_\_\_\_\_  
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.

*Pamela F. Tatum* 4/12/24  
**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                      X 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.

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Sign w/Title:

Date: *Camela Tateum 4/12/24*

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