



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: Robbie McNeill Date: 9-16-24  
Site Address: 4518 Ross Rd Lillington NC 27546 Phone: 910-984-5828  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: 32x40 Shop Total Job Cost: 30,000.00

General Contractor Information

Robbie McNeill  
Building Contractor's Company Name Telephone 910-984-5828  
4518 Ross Rd Lillington NC 27546 Address Email Address robbie.wombles@yahoo.com

HEATED SQ FT \_\_\_\_\_ GARAGE SQ FT 1,280

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

Electrical Contractor Information

Description of Work Wire Shop Service Size: 200 Amps T-Pole:  Yes  No  
Patrick Electrical LLC Telephone 910-237-1594  
1309 N. main st Lillington, N.C 27546 Address Email Address tommy.patrick.910@gmail.com

49104  
License # \_\_\_\_\_

Mechanical/HVAC Contractor Information

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

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

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

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

Plumbing Contractor Information

Description of Work \_\_\_\_\_ # 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.

Renee McNeill  
Signature of Owner/Contractor/Officer(s) of Corporation

9-16-2024  
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: Renee McNeill owner Date: 9-17-2024