



Application # _____

Harnett County Central Permitting
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

* 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: James R & Shelley H Penley Date 1/17/2025
Site Address: 8030 NC Hwy 42 Holly Springs NC 27540 Phone 336 416-1244
Subdivision: _____ Lot _____
Description of Proposed Work: Metal Building (Garage with Restroom) Total Job Cost \$ 90,000

General Contractor Information

James Penley 336 416-1244
Building Contractor's Company Name Telephone
308 Tigers Eye Way, Holly Springs NC 27540 penleyr@icloud.com
Address Email Address

HEATED SQ FT 1800 **GARAGE SQ FT** 1500
License # _____

Electrical Contractor Information

Description of Work Install service panel & basic wiring Service Size: 200 Amps T-Pole: ____ Yes ☒ No
Hogue Electric Co. Inc. 910 890-2556
Electrical Contractor's Company Name Telephone
2951 McDougald Rd, Lillington NC 27546 alhogue@prodigy.net
Address Email Address
4424-U
License # _____

Mechanical/HVAC Contractor Information

Description of Work Metal Building Construction

Mechanical Contractor's Company Name Telephone

Address Email Address

License # _____

Plumbing Contractor Information

Description of Work Septic Installation & water service # Baths 1
BC Septic Services LLC 910 850-5224
Plumbing Contractor's Company Name Telephone
3868 Spring Hill Church Rd Lillington NC
Address Email Address
11159
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.

James R Penley
Signature of Owner/Contractor/Officer(s) of Corporation

1/17/2025
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: James R Penley Date: 1/17/2025