



Application # _____

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

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Sean Kane Date: 7/18/25

Site Address: 187 Hale Storm Lane Phone: 919-441-0968

Subdivision: _____ Lot: _____

Description of Proposed Work: 26.10 x 56 off frame modular w 6 x 22 front porch

General Contractor Information

TCC Vanderbuilt LLC

Building Contractor's Company Name

3300 Jefferson Davis Hwy Sanford NC 27332
Address 43964

919-770-4413

Telephone

woodyhbw@hotmail.com

Email Address

License #

Electrical Contractor Information

Description of Work Carolina Power & Generators Inc. Service Size: 200 Amps T-Pole: Yes No
910-585-4883

Electrical Contractor's Company Name

420 Hwy 15/501 Carthage NC 28327
Address 32340

Telephone

barbie@carolinapowerandgenerators.com

Email Address

License #

Mechanical/HVAC Contractor Information

Description of Work _____

Sure Temp Mechanical

(919) 777-0668

Mechanical Contractor's Company Name

3105 Hal Siler Dr, Sanford, NC 27332

Telephone

support@suretemp hvac.net

Address

13957

Email Address

License #

Plumbing Contractor Information

Description of Work _____

NR Curtis

Baths

2

919-770-0168

Plumbing Contractor's Company Name

6314 Carbonton Rd Sanford NC 27330
Address 10924

Telephone

hr.curtis@windstream.net

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.

A handwritten signature in black ink.

7/18/25

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

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:

A handwritten signature in black ink.

Date:

7/18/25