

RESIDENTIAL BUILDING APPLICATION

Site Address: 683 Docs Road, Lillington, NC. 27546 PIN: 0507-25-0960.000
Owner: Wylie Joseph / Kristen Phone: 440-623-5350 Email: joewylie00@yahoo.com
Description of Proposed Work: 30'X56' New Off Frame Modular W/
7'X20' Front Dormer Porch Total Job Cost: \$300,454.00

GENERAL CONTRACTOR INFORMATION

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

TCC Vanderbuilt LLC.
General Contractor's Company Name
3300 Jefferson Davis Hwy, Sanford, NC. 27332
Address
43964
License #

919-718-2760
Phone
joseph.bare@ncmodulars.com
Email

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Electrical
Carolina Power & Generators
Electrical Contractor's Company Name
420 Hwy 15/501, Carthage NC 28327
Address
32340
License #

Service Size: 200 Amps T-Pole: YES ☐ NO ☐
910-585-4883
Phone
barbie@carolinapowerandgenerators.com
Email

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Mechanical
Carolina Air Heating & Cooling
Mechanical Contractor's Company Name
3700 Hwy 15/501, Carthage NC 28327
Address
34838
License #

910-947-7707
Phone
kelly@carolinaair.com
Email

PLUMBING CONTRACTOR INFORMATION

Description of Work: Plumbing # of Fixtures: _____
HR Curtis Plumbing
Plumbing Contractor's Company Name
6314 Carbonton Rd, Sanford NC 27330
Address
10924
License #

919-770-0168
Phone
hrcurtis@windstream.net
Email

INSULATION CONTRACTOR INFORMATION

Insulation Contractor's Company Name

Phone



I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Joseph A. Bare

Signature of Owner/Contractor/Officer of Corporation

09/10/2025

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

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

☐ Has 3 or more employees and has obtained workers' compensation insurance to cover them,

☐ Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

☒ Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

☐ Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

Joseph A. Bare

Signature of Owner/Contractor/Officer of Corporation

09/10/2025

Date