

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

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

Application for Residential Building and Trades Permit

Owner's Name: Kristin + Stuart WellS	Date 5-28-25
Site Address: 254 Misty Wood Dr FV NC 27526	Phone 919-413-7934
Subdivision: South Ridge Farms	Lot15
Description of Proposed Work: Add Add Hon off Backofgarag	(Total Job Cost \$110,000
General Contractor Information	1
Burakowski Enterprises LLC	919-369-9171
Building Contractor's Company Name	Telephone
66 Tim Cir Angier NC 27501	burakowskienterprises/e/gmail.
Address	Email Address
87569 HEATED SQ FT.516 GARAGE SC	Q FT
License #	
Description of Work Wire New And Italy Service Size:	200 Amps T-Pole: Yes X' No
BPG Electric	919-235-8612
Electrical Contractor's Company Name	Telephone
905 Peterson Ridge Rd FVNC 23526	brandongoss & bpg electric, net
Address	Email Address
36869	
License #	
Mechanical/HVAC Contractor Inform	N .
Description of Work Install New Package unit for ado	lition
Design Mechanical INC	919-557-7683
Mechanical Contractor's Company Name	Telephone
to Box 700 Willow Spring NC 27592	designmechanical OI a gmail, c
Address	Email Address
34668	
License # Plumbing Contractor Information	na.
Description of Work Plumb New Bathroom in addition	# Baths
Campen Plumbing	919-557-1589
Plumbing Contractor's Company Name	Telephone
7229 Oak Village way FV NC 27526 Address	Comdensplumbing R Q acl. com
18903	Email Address
License #	
Insulation Contractor Information	
	919-630-8365
Insulation Contractor's Company Name & Address Ralkigh NC 27/610	Telephone
12 a 16 vich 1890 2 1/4 1/2	

*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 successful save fee is \$150.00. After 2 years re-issue fee

is as per current fee schedule.

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.	

5-28-25