



## RESIDENTIAL BUILDING APPLICATION

390	
Site Address: 380 DR Harvel Lane Lillington, NC 27546Pm	
Owner: Linda and Barry Spiege Phone: 910-890-447	9 Email: georgialady50@aol.com
Approx. 246 ft2 of deck	ing of & BerramsTotal Job Cost: 202,877
Approx. 246 Hz of deck	Bath Isitting room
* Must be owner or licensed contractor. Address, company name & phone must match information on license.	
Dennis Grice Custom Homes	919-901-9514
General Contractor's Company Name	Prione
113 Cedar Springs Drive Princeton, NC 27569 Address	gricedennis 425@gmail.com
60863 License #	
ELECTRICAL CONTRACTOR INFORMATION	
Description of Work: Install new electrical to service addition	Service Size: 200 Amps T-Pole: YES □ N® 1
Deep Roots Electrical, LLC Electrical Contractor's Company Name	984-274-3667
	Phone + 1 + 1
232 Kensington Court Clayton, NC 27527	Deeprootselectrical@gmail.com
35253	Email
License #	
MECHANICAL/HVAC CONTRACTOR INFORMATION	
1+11 1 + .	++
Description of Work: Install new hvac to service new square	O
GEM Cuslom Construction	919-931-5700
Mechanical Contractor's Company Name	Phone
190 Wembury Drive Clayton, NC 27527	morrismech@gmail.com
30716 +t-3-1	•
License #	
PLUMBING CONTRACTOR INFORMATION	
Description of Work: Plumb a new bathroom to include rough	in and frim out # of Fixtures: 3
	919-735-7837
Rosewood Plumbing Inc. Plumbing Contractor's Company Name	Phone
870 Rosewood Rd. Goldsboro, NC 27530	into a rose woodplumbing.com
Address / O/19/7	Email / J
L. 04867 License #	
INSULATION CONTRACTOR INFORMATION	
Carrie Laulton 110	919-1122-27/5
Insulation Contractor's Company Name	919-422-2765 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.

| Denote | T/7/25 |
| Signature of Owner/Contractor/Officer 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	
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.	
Signature of Owner/Contractor/Officer of Corporation  7/7/25  Date	