



strong roots • new growth

CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

RESIDENTIAL BUILDING APPLICATION

Site Address: 140 Pondhurst Ln. PIN: 0634-81-4086.000
Owner: William Burton Phone: 919-274-6383 Email: wilburton@gmail.com
Description of Proposed Work: Detached Garage Total Job Cost: \$119,950

GENERAL CONTRACTOR INFORMATION

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

Elm Street Builders, LLC 919-810-9163
General Contractor's Company Name Phone
3434 Kildaire Farm Rd. Suite 240 chrisweir@elmstreetbldrs.com
Address Email
76718
License #

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Extend service from existing dwelling to detached garage Service Size: 200 Amps T-Pole: YES ☐ NO ☒
W3 Electric Inc. 919-550-7341
Electrical Contractor's Company Name Phone
308 W Main St. Clayton, NC, 27520 sjones@w3electric.com
Address Email
34522-U
License #

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Install minisplit unit
Biggs HVAC Inc. 919-329-8288
Mechanical Contractor's Company Name Phone
298 Shipwash Dr. Garner, NC, 27529 Shantelledriver@biggshvac.com
Address Email
19100
License #

PLUMBING CONTRACTOR INFORMATION

Description of Work: _____ # of Fixtures: _____
Plumbing Contractor's Company Name _____ Phone _____
Address _____ Email _____
License # _____

INSULATION CONTRACTOR INFORMATION

Will Cee Insulation, LLC 919-457-3989
Insulation Contractor's Company Name Phone

APPLICATION CONTINUES ON BACK



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.

Chris Weir
Signature of Owner/Contractor/Officer of Corporation

9/15/25
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.

Chris Weir
Signature of Owner/Contractor/Officer of Corporation

9/15/25
Date