



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: 207 Cedar Wood Dr. 28339 PIN: Envin NC
Owner: Constance Lewis Phone: N/A Email: N/A
Description of Proposed Work: Rebuild from fire loss Total Job Cost: \$110,000

GENERAL CONTRACTOR INFORMATION

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

Highland Construction and Restoration 910-624-2667
General Contractor's Company Name Phone
245 Tillinghast St. Fayetteville NC 28301 rmcnaughten@bmsmanagement.com
Address Email
25594 Ronnie-PM
License #

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Temp Pole / Full rough in to trim out Service Size: N/A Amps T-Pole: YES ☒ NO ☐
WO'S Electric 910-850-5495
Electrical Contractor's Company Name Phone
575 Cope Rd. Red Springs NC 28377 woselectric@live.com
Address Email
196280
License #

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Remove + Replace Ductwork, Check HVAC System, Radiators
Forest Heating and Air 910-323-0587
Mechanical Contractor's Company Name Phone
2976 Dunn Rd. Eastover NC 28322 N/A
Address Email
17439 H2-H3
License #
27413 SP-PH

PLUMBING CONTRACTOR INFORMATION

Description of Work: Cap of water lines, Reset Fixtures once repairs complete # of Fixtures: 10
Glynn Glover Plumbing CO. 910-354-7506
Plumbing Contractor's Company Name Phone
N/A glynnghoversplumbing@gmail.com
Address Email
29154-P1
License #

INSULATION CONTRACTOR INFORMATION

Cumberland Insulation 910-484-7118
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.

Signature of Owner/Contractor/Officer of Corporation

9/4/25
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.

Signature of Owner/Contractor/Officer of Corporation

9/4/25
Date