



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: 188 Mels Meadows Dr., Fuquay Varina, NC 27526 PIN: 0645-25-5890.000
Owner: Sibelius Forest LLC, Britt Nylund Phone: 201-317-3793 Email: bnylund02@gmail.com
Description of Proposed Work: Garage addition & renovation to existing home Total Job Cost: \$120,000

GENERAL CONTRACTOR INFORMATION

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

Britt Nylund, Homeowner 201-317-3793
General Contractor's Company Name Phone
188 Mels Meadows Drive, Fuquay Varina, NC 27526 bnylund02@gmail.com
Address Email
License #

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Install additional electric for addition Service Size: _____ Amps T-Pole: YES ☐ NO ☐
Britt Nylund, Homeowner
Electrical Contractor's Company Name Phone
Address Email
License #

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Add additional air flow & condenser for expanded 1st floor of home; move smaller existing system to service 2nd floor
Britt Nylund, Homeowner
Mechanical Contractor's Company Name Phone
Address Email
License #

PLUMBING CONTRACTOR INFORMATION

Description of Work: Remove existing plumbing from bathroom to be relocated & install new plumbing for new bathrooms # of Fixtures: 7
Britt Nylund, Homeowner
Plumbing Contractor's Company Name Phone
Address Email
License #

INSULATION CONTRACTOR INFORMATION

Britt Nylund, Homeowner
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

8/4/25

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.

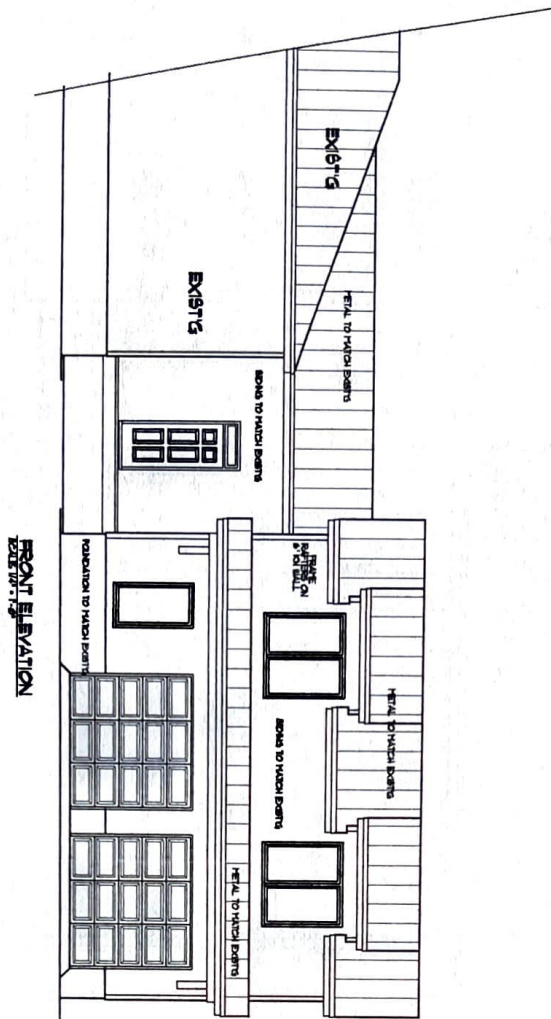


Signature of Owner/Contractor/Officer of Corporation

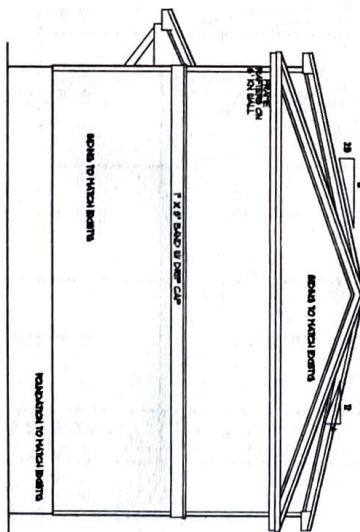
8/4/25

Date

ALL DIMENSIONS AND CONDITIONS
 SHALL BE CONSIDERED
 AS NOTED ON THE SET. THE 2018
 CODES GOVERN OVER DRAWING
 DIMENSIONS GOVERN OVER SCALE
 ALL MECHANICAL REQUIREMENTS BEFORE
 ANY CONSTRUCTION SHALL BE
 OBTAINED FROM THE LOCAL
 OFFICIALS OF THE JURISDICTION



FRONT ELEVATION



SIDE ELEVATION

GENERAL PRACTICE NOTES

- Photo courtesy of the U.S. Coast Guard**

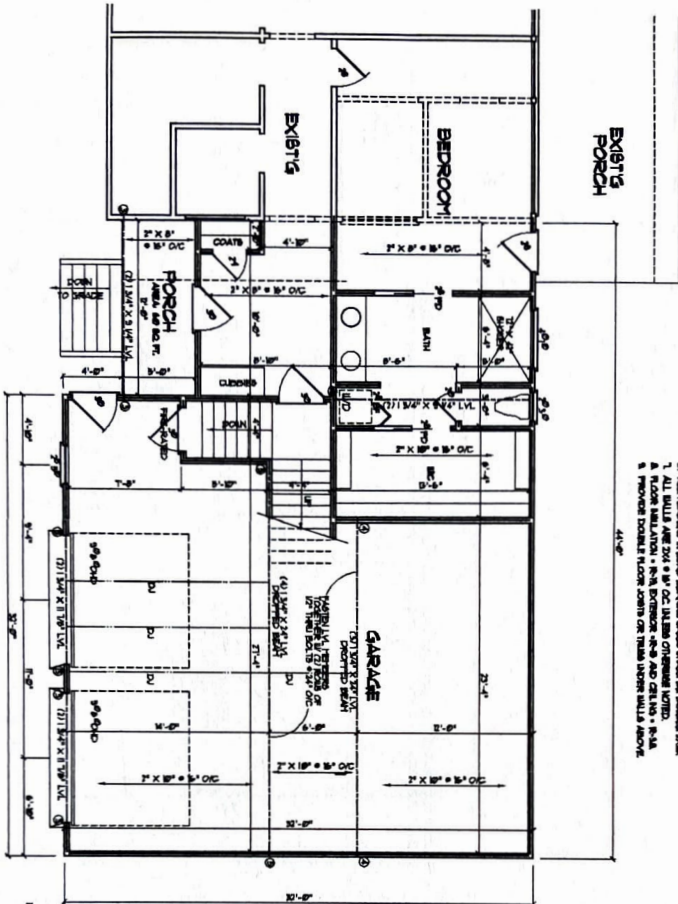
HEALTH WARNING: CIGARETTE SMOKE CAN BE VERY HARMFUL TO YOUR HEALTH. QUITTING NOW GREATLY REDUCES Serious Risks to Your Health.

HEADER SPAN PLYTH SIZED SPACERS (INCHES)
 PER TABLE ROW(ROW)

16	24
1	1
3	1

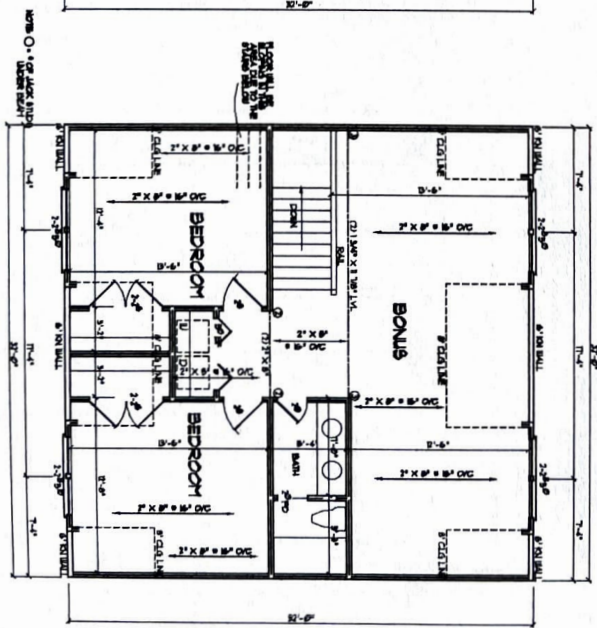
LESS MATERIAL TO 3"
 4"

1. BILLED SHALL BE RETURNED PER SECTION BILLED TO THE CORRESPONDING CODE
2. THE BIDDING SHALL, FINANCING SHALL BE CONTINUOUSLY MONITORED, ALL ABOUT BIDDING, MONITORING THE BIDDING, THE BIDDING SHALL BE CONDUCTED IN CONFORMANCE TO THE C&G DETAILS
3. BIDDING OF DESIGN FOR FINANCING SHALL BE A SPECIAL BIDDING PERIOD AS DETERMINED PER CODE SHALL BE BIDDING
4. SPECIAL BIDDING PERIODS ARE ESTABLISHED IN THE CODE AND ALLOWED BIDDING SHALL BE CONDUCTED IN CONFORMANCE TO THE C&G DETAILS PERIODS TO GUARANTEE ORIGINAL PERIOD, FINANCING DETAILS



FLOOR PLAN

ALL BRICKS FOR THE GARAGE DOORS WILL BE POLE BURNED AND FINISHED IN ACCORDANCE WITH FINISH MANUAL OF THE NORTH CAROLINA BRICKS CO. 2005 ED. FOR REPRODUCER



FLOOR PLAN

GARAGE AREA 347 SQ. FT.
APPROXIM. WTD AREA 400 SQ. FT.

NOTE:
FIELD VERIFY ALL DIMENSIONS

HOWERTON SERVICES, PLLC
2015 CONVENT, BELL ROAD BUILDING, NC 27014
LICENSE # 17718

• **DESIGNING, ENGINEERING, ARCHITECTURAL, CONSTRUCTION AND PROJECT MANAGEMENT SERVICES FOR:**
• **WATER, SEWER, AND SOLID WASTE COLLECTION SYSTEMS**
• **WATER, SEWER, AND SOLID WASTE TREATMENT PLANTS**
• **WATER, SEWER, AND SOLID WASTE DISPOSAL FACILITIES**
• **WATER INFRASTRUCTURE**

• **WE ARE CURRENTLY ACCEPTING OF NEW CLIENTS TO BE ASSIGNED TO:**
• **DESIGN, ENGINEERING, ARCHITECTURAL, AND CONSTRUCTION**
• **OF WATER, SEWER, AND SOLID WASTE COLLECTION SYSTEMS**
• **AND TREATMENT PLANTS - DOMESTIC AND INDUSTRIAL**

CALL TODAY FOR MORE INFORMATION - 800.875.8776 EXT. 105
OR 708.202.1001



ALL CONSTRUCTION SHALL CONFORM TO THE 2018 EDITION OF THE NC STATE BUILDING CODE

CODES GOVERN OVER DEADLINES

DRAWINGS GOVERN OVER SCALE

VERIFY ALL MECHANICAL REQUIREMENTS BEFORE FINISHING

VACANT OWNERS DOES NOT ASSUME LIABILITY FOR DAMAGE OR DESTRUCTION METHODS OF THESE PLANS.

[illegible]

NOTE:
FIELD VERIFY ALL DIMENSIONS

IN ADDITION TO EXISTING:
PLAN ROOM
 ATTIC AREA - 1001 SQ. FT.
 REQUIRED AREA - 4000 - 448 SQ. FT.

NOTES:
 ALL EAVES TO HAVE 2" CONTINUOUS
 GUTT WITH
 ALLOW 1" AIR SPACE ABOVE INSULATION
 FOR AIR FLOW

NOTES
ALL BAYS TO HAVE 2" CONTINUOUS
DOWN VENT
ALLOW 1" AIR SPACE ABOVE INSULATION
FOR AIR FLOW

HOMERON SERVICES, PLLC
3513 CEDARHURST
BELL ROAD INDIANAPOLIS, IN 46214
LICENSE # 1716

1. I HEREBY SAY I AM ONLY IN SERVICE CONNECTION TO THE
FOLLOWING: SEI VON NIE WILDER CONNECTIONS INC.
2. I HAVE BEEN ADVISED BY THE ABOVE NAMED COMPANY OF
HOW, EXACTLY, TO OBTAIN SERVICE, INCLUDING THE
APPROXIMATE COST.
3. I HAVE BEEN ADVISED OF THE RIGHTS OF A PERSON TO BE PROSECUTED
FOR VIOLATING THE ABOVE NAMED COMPANY'S POLICY
REGARDING ATTENTION OF THE POLICE, EITHER TO DO SO OR
TO REQUEST A LITIGATION.
4. I DO NOT HAVE OTHERS - IMMEDIATE ATTORNEY, ETC. 05
04/07/2005

DATE: 11/11/2011

FUQUAY VARINA, NC

