



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: 5322 Cool Springs Rd., Broadway PIN: 0602-44-7658-000
Owner: Jessica Faircloth Phone: (919) 499-8501 Email: jfaircloth82@gmail.com
Description of Proposed Work: Construction of an inground swimming pool approximately 36' x 21' includes coping & 895 sq. ft of decking. Pool will be heated. Includes a 60' long x 2' tall retaining wall. Total Job Cost: \$226,000
Includes 7' round spa. **GENERAL CONTRACTOR INFORMATION**

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

Jim Hinson Pools, LLC. 919-779-2062
General Contractor's Company Name Phone
5813 Lease Ln., Raleigh, NC 27617 pearlpermits@pools-world.com
Address Email
84027
License #

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Pool Bonding & Equipment Service Size: 50 Amps T-Pole: YES ☐ NO ☐
Frontier Electrical (919) 417-6369
Electrical Contractor's Company Name Phone
4070 Pine Ridge Rd., Franklinton, frontierelectrical2011@
Address NC 27278 Email gmail.com
23712
License #

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Gas lines for pool heater
KMH Inc. (919) 368-9966
Mechanical Contractor's Company Name Phone
8800 Carolina Marlin Ct., Raleigh kmh1168@gmail.com
Address NC 27603 Email
31519
License #

PLUMBING CONTRACTOR INFORMATION

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

INSULATION CONTRACTOR INFORMATION

Insulation Contractor's Company Name _____ 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.

Karen Scheller
Signature of Owner/Contractor/Officer of Corporation

10/10/25
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.

Karen Scheller
Signature of Owner/Contractor/Officer of Corporation

10/10/25
Date