

Harnett County Central Permitting  
PO Box 65 Lillington NC 27546  
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Each section below to be filled out by whomever performing work Must be owner or licensed contractor Address company name & phone must match

**Application for Residential Building and Trades Permit**

Owner's Name Bernard F. Young Date \_\_\_\_\_  
Site Address 146 Old Stage Road Lillington NC Phone 919 639 2934  
Directions to job site from Lillington 218 East Rouschiff Road to Old Stage Road go right house on left

Subdivision Cathy McLamb Lot 2  
Description of Proposed Work SPICE # of Bedrooms 2  
Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space  Slab \_\_\_\_\_

**General Contractor Information**

LM Langdon Telephone 919-422-6946  
Building Contractor's Company Name \_\_\_\_\_  
150 Lansing Dr. Benson Email Address NA  
Address \_\_\_\_\_  
55716  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work SPIC House Service Size \_\_\_\_\_ Amps T-Pole  Yes \_\_\_\_\_ No \_\_\_\_\_  
R.A. JACKSON Electric Inc Telephone 919 894 5367  
Electrical Contractor's Company Name \_\_\_\_\_  
9261 Raleigh Road Benson NC 27504 Email Address \_\_\_\_\_  
Address \_\_\_\_\_  
21144  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work New House  
Bearley Heat + Air Inc Telephone 919 894 4248  
Mechanical Contractor's Company Name \_\_\_\_\_  
57 Wallace Coats NC 27521 Email Address \_\_\_\_\_  
Address \_\_\_\_\_  
9497  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work New House # Baths 2  
Mike Smith Plumbing Telephone 919 639-3117  
Plumbing Contractor's Company Name \_\_\_\_\_  
109 AdLit 2.0 Lane Angier, NC 27501 Email Address \_\_\_\_\_  
Address \_\_\_\_\_  
18200  
License # \_\_\_\_\_

**Insulation Contractor Information**

Insulation Inc Raleigh NC Telephone 919 772 9000  
Insulation Contractor's Company Name & Address \_\_\_\_\_

\*NOTE General Contractor must fill out and sign the second page of this application

I hereby certify that I have the authority to make necessary application that the application is correct and that the construction will conform to the regulations in the Building Electrical Plumbing and Mechanical codes and the Harnett County Zoning Ordinance I state the information on the above contractors is correct as 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 any and all changes

**EXPIRED PERMIT FEES** - 6 Months to 2 years permit re-issue fee is \$150 00 After 2 years re-issue fee is as per current fee schedule

Bernard F. Young  
Signature of Owner/Contractor/Officer(s) of Corporation

8/13/12  
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

Do hereby confirm under penalties of perjury that the person(s) firm(s) or corporation(s) performing the work set forth in the permit

Has three (3) or more employees and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

Has one (1) or more subcontractors(s) who has their own policy of workers compensation insurance covering themselves

Has no more than two (2) employees and no subcontractors

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker s compensation insurance prior to issuance of the permit and at any time during the permitted work from any person firm or corporation carrying out the work

Company or Name Bernard F. Young

Sign w/Title \_\_\_\_\_ Date 8/13/12

Plan Box # B-5

Date 8-10-12

Job Name Bernard Young

App # 12 500 29486

Valuation 127734

SQ Feet 1966

**Inspections for SFD/SFA**

Crawl X

Slab \_\_\_\_\_

Mono \_\_\_\_\_

Footing	Footing	Plumbing Under Slab
Foundation	Foundation	Ele. Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500 \_\_\_\_\_

>2500 \_\_\_\_\_

>2500 \_\_\_\_\_

Foundation Survey \_\_\_\_\_

Envir. Health New Tank

Other \_\_\_\_\_

**Additions / Other**

Footing \_\_\_\_\_

Foundation \_\_\_\_\_

Slab \_\_\_\_\_

Mono \_\_\_\_\_

Open Floor \_\_\_\_\_

Rough In \_\_\_\_\_

Insulation \_\_\_\_\_

Final \_\_\_\_\_