



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

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

Application for Residential Building and Trades Permit

Owner's Name: John Black Date 4/10/25
Site Address: 479 Cross Link Drive, Angier, NC, 27501 Phone 9196067961
Subdivision: CROSS LINK PLACE Lot 47
Description of Proposed Work: Like for like 3.5 ton split heat pump and air handler. Total Job Cost 6217
Air handler is in the crawlspace.

General Contractor Information

Building Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____ **HEATED SQ FT** _____ **GARAGE SQ FT** _____

Electrical Contractor Information

Description of Work Like for like 3.5 ton split heat pump and air handler. Service Size: _____ Amps T-Pole: ☐ Yes ☒ No
Yellow Dot Heating and Air Conditioning 919-754-8686
Electrical Contractor's Company Name _____ Telephone _____
2400 Sumner Blvd. Suite 120. Raleigh, NC, 27616 permits@ydhvac.com
Address _____ Email Address _____
32690
License # _____

Mechanical/HVAC Contractor Information

Description of Work Like for like 3.5 ton split heat pump and air handler. Air handler is in the crawlspace.
Yellow Dot Heating and Air Conditioning 919-754-8686
Mechanical Contractor's Company Name _____ Telephone _____
2400 Sumner Blvd. Suite 120. Raleigh, NC, 27616 permits@ydhvac.com
Address _____ Email Address _____
32872
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

***NOTE: General Contractor / owner 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.

A handwritten signature in black ink, appearing to read "E. J. H. H. H. H. H.", is written over a horizontal line.

Signature of Owner/Contractor/Officer(s) of Corporation

4/10/25

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

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.

Sign w/Title: _____ Date: _____