



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: Brian Hagesse Date 12 Feb 2025
Site Address: 985 Mitchell Rd, Lillington NC, 27546 Phone 919 432 9016
Subdivision: _____ Lot _____
Description of Proposed Work: New Electrical Service Install Total Job Cost \$1000.00

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 New Service Install Service Size: 200 Amps T-Pole: ☒ Yes ☐ NoElectrical Contractor's Company Name Johnnie Mabry, Mabry's Electrical Service Telephone 919 639 4837Address 731 Mabry Rd. Angier, NC 27501 Email Address _____License # 150774**Mechanical/HVAC Contractor Information**

Description of Work _____

Mechanical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

License # _____

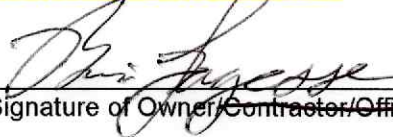
Insulation Contractor Information

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.

 Brian Lagesse
Signature of Owner/Contractor/Officer(s) of Corporation
owner of property

12 Feb 2025
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

_____ General Contractor ☒ Property 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: Owner - Brian Lagesse Date: 12 Feb 2025



731 Mabry Rd.
Angier, NC 27501

Phone # 919-639-4837

Licence 15077U

Brian Lagesse
985 Michell Rd.
Angier, NC 27501

PAID

Invoice

Date 12/18/2024

Invoice # 166781

Job		Due Date
985 Michell Rd.		12/18/2024
Description	Qty/Hrs	Amount
Labor for 2 Electricians	2.5	375.00
To install customer supplied 200 amp overhead service poll		
Harnett County Sales Tax		0.00
Total Due		\$375.00

Terms: If paying with a credit card please note there will be a 5% handling charge. Net Due And Payable Upon Receipt. After 14 days, a finance charge computed @ 1.5% per month (18% annum) will be added to the remaining balance. Delinquent accounts shall be referred to an attorney for collection once said account becomes 60 days past due. Upon the hiring of an attorney to collect on said account, the debtor shall be subject to an assessment for attorney's fee in the amount of 15% of the balance owed at the time suit for collection is filed, as well as court costs.