



centralpermitting@harnett.org

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

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

Application # _____

Application for Residential Building and Trades Permit

Owner's Name: Martin E. Annette Spivey Date 3/14/25
Site Address: 75 Williams town Ln. Phone 910-973-9213

Subdivision: _____
Description of Proposed Work: 20'x20' Sunroom / Laundry RM + 6'x8' Deck Lot _____
Total Job Cost 165,000

General Contractor Information

McLeod Home Services, LLC 919-464-9137
Building Contractor's Company Name Telephone
20 Mary Gray Ct. gene@McLeodhomeservices.com
Address Email Address
101475 HEATED SQ FT 400 GARAGE SQ FT N/A
License #

Electrical Contractor Information

Description of Work Upgrade panel Service Size: 200 Amps T-Pole: Yes ☒ No
Cambron Electric LLC 919-750-1929
Electrical Contractor's Company Name Telephone
123 Scotts Creek Run Cambronelectricllc@gmail.com
Address Email Address
35397
License #

Mechanical/HVAC Contractor Information

Description of Work Possible Mini Split or tying into existing package unit
Quality Comfort 984-212-0680
Mechanical Contractor's Company Name Telephone
725 Bethlehem Rd. Knightdale NC 27545 jrodriguez@qeshvac.com
Address Email Address
21368
License #

Plumbing Contractor Information

Description of Work Relocate Laundry room plumbing to new location # Baths 2
Henderson Plumbing Inc. 919-274-4854
Plumbing Contractor's Company Name Telephone
120 Juniper Dr. Clayton, NC 27520 eric@hendersonsplumbing.com
Address Email Address
35404
License #

Insulation Contractor Information

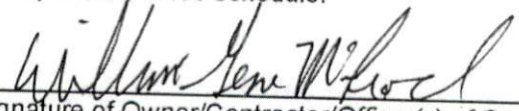
McLeod Home Services 919-464-9137
Insulation Contractor's Company Name & Address Telephone

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

strong roots • new growth

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.


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


3-14-25
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: William Gene McLeod Owner McLeod Home Services LLC Date: 3-14-25