



Application # \_\_\_\_\_

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

**Application for Residential Building and Trades Permit**

Owner's Name: Mike Burke Date: 3/7/25  
Site Address: 1823 Oakridge River Road Phone: 9193238454  
Subdivision: N/A Lot: 2  
Description of Proposed Work: basement renovation & 1/2 bathroom Total Job Cost: 21,535.00

**General Contractor Information**

Karma Construction Group LLC 919-600-4056  
Building Contractor's Company Name Telephone  
2500 Regency Parkway Jon@karmacgroup.com  
Address Email Address

09228 HEATED SQ FT \_\_\_\_\_ GARAGE SQ FT NA  
License #

**Electrical Contractor Information**

Description of Work Recess lighting, 120amp switch Service Size: 200 Amps T-Pole: ☐ Yes ☒ No  
HARRIS ELECTRICAL CONTRACTORS 919-694-1485  
Electrical Contractor's Company Name Telephone  
92 CORNERSTONE DR PMB 327, CARY, 27519 HARRISELECTRICALCONT@GMAIL.COM  
Address Email Address  
U.35997  
License #

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_  
Mechanical Contractor's Company Name Telephone  
Address Email Address  
License #

**Plumbing Contractor Information**

Description of Work Bath addition w/saniflow # Baths 1  
Plumbserve LLC 919-964-9504  
Plumbing Contractor's Company Name Telephone  
Po Box 111 Creedmoor NC 27522 admin@plumbserve.com  
Address Email Address  
35021  
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.

Jonathan C Barnett

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

3/7/2025

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: Jonathan C Barnett owner    Date: 3/7/2025