



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: BRADLEY AND ELSA STEVENS Date: 3/30/2025
Site Address: 10 HENSCHER LANE, BROADWAY, NC 27505 Phone: 910-494-4106
Subdivision: _____ Lot: _____
Description of Proposed Work: BUILD A 1,650 SF HOME ON A CRAWL SPACE FOUNDATION Total Job Cost: \$350,000

General Contractor Information

ERICKSON HOMES LLC 910-403-1973
Building Contractor's Company Name Telephone
1507 SLOCOMB ROAD, LINDEN, NC 28356 SAMANTHA@ERICKSONHOMESNC.COM
Address Email Address
100412 HEATED SQ FT 1,650 GARAGE SQ FT 579
License #

Electrical Contractor Information

Description of Work ELECTRICAL ROUGH- IN AND TRIM OUT Service Size: 400 Amps T-Pole: x Yes No
Pigtail Electric L.L.C. (919)-915-2695
Electrical Contractor's Company Name Telephone
370 Slapout Road, Mount Olive, NC 28365 pigtaillc@gmail.com
Address Email Address
L.36666
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC ROUGH- IN AND SET OUTS
CAROLINA COMFORT AIR 919-901-8901
Mechanical Contractor's Company Name Telephone
703 N. CLINTON AVE, DUNN, NC 28334 ASmith@carolinacomfortair.com
Address Email Address
L.29077
License #

Plumbing Contractor Information

Description of Work PLUMBING ROUGH- IN AND SET OUTS # Baths 2
CELEY'S QUALITY SERVICES LLC 919-938-1813
Plumbing Contractor's Company Name Telephone
636-6b Old Roberts Road, Benson, NC 27504 Schedule@celeys.com
Address Email Address
L.32853
License #

Insulation Contractor Information

CUMBERLAND INSULATION: 4205 CLINTON ROAD, FAYETTEVILLE, NC 28312 910-484-7118
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.

Andrew Erickson

3/31/2025

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

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: *Andrew Erickson* GENERAL CONTRACTOR Date: 3/31/2025