

\*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

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

**COMMERCIAL**

**Application for Building and Trades Permit**

Owner's Name: POURTSERVE LLC

Date: 10/17/2025

Site Address: 130 BRANDYWOOD CT, CAMERON NC

Phone: 902-541-5257

Directions to job site from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Lot: \_\_\_\_\_

Description of Proposed Work: DEMO EXISTING RESIDENT / NEW CONSTRUCTION OF SCOOPER

Heated SF \_\_\_\_\_

Unheated SF \_\_\_\_\_

General Contractor Information: Building Cost \$ 734,662

HUDSON COMPANY OF TENNESSEE

Building Contractor's Company Name

PO BOX 429 HENAGAR AL 36778

Address

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

754-657-1010

Telephone

KIM@HUDSONCOINC.COM

Email Address

13A50

License #

Description of Work: Electrical Scope

Electrical Cost \$ 78,000

Service Size: 400 Amps #T-Poles \_\_\_\_\_

Insight Electrical Construction LLC

Electrical Contractor's Company Name

4401 Purnell Rd, Wake Forest, NC 27587

Address

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

719-425-1077

Telephone

ap@insightelec.com

Email Address

34173

License #

Mechanical Contractor Information: Mechanical Cost \$ 79,000

Description of Work: HVAC

# Units \_\_\_\_\_

Arnold Service Co.

Mechanical Contractor's Company Name

880 Person St Fayetteville, NC 28301

Address

910-425-3350

Telephone

scott@ascheatandair.com

Email Address

22474

License #

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

Plumbing Contractor Information: Plumbing Cost \$ 62,700

Description of Work: Commercial Plumbing

# Baths \_\_\_\_\_

Mckenzie Plumbing

Plumbing Contractor's Company Name

444 Cedar Creek RD Fayetteville, NC 28312

Address

Telephone

projects@mckenzieplumbing

Email Address

13588

License #

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

**Insulation Contractor Information**

Insulation Contractor's Company Name & Address

Telephone

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

N/A

**Sprinkler Contractor Information**

Sprinkler Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Signature of Officer(s) of Corporation \_\_\_\_\_ License # \_\_\_\_\_

N/A

**Fire Alarm Contractor Information**

Fire Alarm Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Signature of Officer(s) of Corporation \_\_\_\_\_ License # \_\_\_\_\_

**Driveway Access** - NC Department of Transportation Driveway Access/Permit? Yes No

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 Hamett County Zoning Ordinance. I state the information on the above contractors is correct as known to me 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 Hamett 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 charged at full price per current fee schedule.

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

6/17/25  
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.

Company or Name: HUDSON Co OF TN

Sign w/Title: [Signature], VP Date: 6/19/25