



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

**Application for Residential Building and Trades Permit**

Owner's Name: Earl and Jo Griffin Date: 7/29/2020  
Site Address: 7916 Overhills Road, Spring Lake, NC Phone: 910 849-6034  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Adding 2nd Living room/Kitchen Total Job Cost: 50,000.00

**General Contractor Information**

Charles E. Taylor (910) 849-6034  
Building Contractor's Company Name Telephone  
173 Sierra Trail, Spring Lake, NC 28390 CID Construction LLC  
Address Email Address  
33685  
License #

**Electrical Contractor Information**

Description of Work Addition /HVAC Service Size: 200 Amps T-Pole: Yes  No  
Kilowatt Electric (919) 842-7602  
Electrical Contractor's Company Name Telephone  
193 Darkwood Drive, Spring Lake, NC Jimmylucas1970@gmail.com  
Address Email Address  
23887-L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work Addition  
Mike's Heating and Air Conditioning (910) 723-7477  
Mechanical Contractor's Company Name Telephone  
455 Cumberland Road michael.meaur@aol.com  
Address Email Address  
23108  
License #

**Plumbing Contractor Information**

Description of Work Addition # Baths 0  
Larry Lee Plumbing (contact-Timmy Tyner) (910) 494-5286  
Plumbing Contractor's Company Name Telephone  
3200 Wayne Lane, Fayetteville, NC tese99@aol.com  
Address Email Address  
05274  
License #

**Insulation Contractor Information**

Tri City Insulation (910) 486-8855  
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.

Charles E. J. Contractor  
Signature of Owner/Contractor/Officer(s) of Corporation

7/30/2020  
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: \_\_\_\_\_ Date: \_\_\_\_\_