



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: Jodi Smith Date: 7/20/22  
Site Address: 720 N 14th st, Erwin nc Phone: 910-658-1192  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Room Addition to rear of home Total Job Cost: \$83,551.00

**General Contractor Information**

G Double inc 9194694798  
Building Contractor's Company Name  
103 Eaglesham Way, Cary, 27513 Telephone  
Gdouble@nc.rr.com  
Address  
75995 2,040 sqft Email Address  
HEATED SQ FT GARAGE SQ FT  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work install receptacles, switches ceiling fans and vanity lights Service Size: \_\_\_\_\_ Amps T-Pole: Yes No  
Powerflow Electrical 919) 524-9507  
Electrical Contractor's Company Name  
598 Howard Tant Rd Zebulon NC 27597 Telephone  
powerflowelectrical@nc.rr.com  
Address  
23615-SP-S Email Address  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work Install 1 bath exhaust fan vent to exterior of home. Add 3 air supply ducts and 1 return in bedroom and bath addition. Upgrade existing HVAC system to entire home.  
The Cool Guys HVAC 919) 801-8007  
Mechanical Contractor's Company Name  
924 Sandy Hill Wendell, NC Telephone  
Address  
L-32968 Email Address  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work Rough in and set water and drain lines for double vanity, 1 elongated toilet, tub with shower. Add 1 water spigot to the rear of home. Tie drain and water lines into existing system of house. # Baths \_\_\_\_\_  
The Plumbing Partners 9193999968  
Plumbing Contractor's Company Name  
4922 Old Page RD, Apt.632 Telephone  
Durham, NC 27703 US plumbingpartnersllc@gmail.com  
Address  
33781 Email Address  
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.

*Cathy Judy*

7/20/22

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: *Cathy Judy*

Contractor

7/20/22

Date: \_\_\_\_\_