



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: Christopher Luettger Date: 5/29/23  
Site Address: 2835 Barbecue Church Rd. Phone: 607-591-3350  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: Addition Total Job Cost: \_\_\_\_\_

**General Contractor Information**

Self/Framer - John Wilson 910-984-5089  
Building Contractor's Company Name Telephone  
211 Faircloth Ln. Broadway  
Address Email Address  
HEATED SQ FT 375 GARAGE SQ FT \_\_\_\_\_  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work wire addition Service Size: 200 Amps T-Pole:  Yes  No  
919 842-2814  
Electrical Contractor's Company Name Telephone  
P.R. Faulk Electrical philly@prfaulk-electric.com  
Address Email Address  
11335-4  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work Duct work modifications  
SureTemp Mechanical 919-778-6668  
Mechanical Contractor's Company Name Telephone  
3105 Hal Siler Dr. Sanford N.C. 27332 Shane@suretemp hvcc.net  
Address Email Address  
19738  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work Addition # Baths 1  
Thomas Plumbing & Repair 919-499-8300  
Plumbing Contractor's Company Name Telephone  
841 McArthur Rd Broadway NC Thomasplumbing73@gmail.com  
Address Email Address  
12286  
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.

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

5/29/23  
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: *John Winters* Owner

Date: 6-14-23