

Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: MCDUFFIE JOHNSON JR. Phone: _____

Owner (s) Mailing Address: 614 W J ST
ERWIN NC 28339

Land Owner Name (s): MCDUFFIE JOHNSON JR. Phone: _____

Construction or Site Address: 612 W J ST ERWIN NC 28339

PIN # 0597-36-3703 Parcel # _____

Job Cost: \$6400 Description of Work to be done replace all water piping & re-rough for new shower, install new shower & washer box.

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork _____ Gas Piping _____ Other _____

Electrical*: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____

* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Gary Willis will provide the plumbing labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 18659, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Gary Willis Plumbing, Inc.

Contractor's Company Name

2858 Bailey Rd Coats NC 27521

Address

18659

License #

919-894-2987

Telephone

hayleyhegwplumbinginc.com

Email Address

Structure Owner / Contractor Signature: Gary Willis Date: 7/29/25

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**



Town of Erwin
Zoning Application & Permit
Planning & Inspections Department

Permit #
26-019

Rev Sep 2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	GARY WILLIS PLUMBING	Property Owner	MCDUFFIE JOHNSON JR.
Home Address	2858 BAILEY RD	Home Address	614 W J ST
City, State, Zip	COATS NC 27521	City, State, Zip	ERWIN NC 28339
Telephone	919-894-2987	Telephone	
Email	HAYLEYHEGWPLUMBING@GMAIL.COM	Email	

Address of Proposed Property		612 WEST J ST	
Parcel Identification Number(s) (PIN)	0597-36-3703	Estimated Project Cost	\$6400
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.		replace water lines and fixtures in house.	
Description of any proposed improvements to the building or property			
What was the Previous Use of the subject property?			
Does the Property Access DOT road?			
Number of dwelling/structures on the property already		Property/Parcel size	
Floodplain SFHA	Yes ___ No ___	Watershed	Yes ___ No ___
		Wetlands	Yes ___ No ___
<u>MUST</u> circle one that applies to property <input checked="" type="checkbox"/> Existing/Proposed Septic System Or <input checked="" type="checkbox"/> Existing/Proposed County/City Sewer			

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

GARY WILLIS	<i>[Signature]</i>	7/29/25
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	M10
Front Yard Setback	25
Side Yard Setback	10/20
Rear Yard Setback	25

Existing Nonconforming Uses or Features		Temporary structures	
Other Permits Required	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Building	<input type="checkbox"/> Fire Marshal
Requires Town Zoning Inspection(s)		<input type="checkbox"/> Foundation	<input type="checkbox"/> Prior to C. of O.
Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		
Fee Paid: PAID	Date Paid: NO	Staff Initials: DME	

Comments	replace water lines & fixtures NO expansion
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Signature of Town Representative:	<i>[Signature]</i>	Date Approved/Denied: 7/29/25
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Trades From Harrells Carby