

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: RYAN THOMAS Date: 7/9/19  
 Site Address: 107 SCENIC WAY Phone: 919-548-0824  
 Subdivision: \_\_\_\_\_ Lot: #4  
 Description of Proposed Work: SINGLE FAMILY DWELLING 1500 SQ. FT (FOUNDATION)

**General Contractor Information**

Godwin Construction & Development LLC 919-810-2591  
 Building Contractor's Company Name Telephone  
P.O. Box 1922 DUNN N.C. 28335 buckgodwinconstruction@gmail.com  
 Address Email Address  
75471  
 License #

**Electrical Contractor Information**

Description of Work WIRING FOR SFD (1500 SQ. FT) Service Size: 200 Amps T-Pole:  Yes  No  
Parker's Electric 910-984-6810  
 Electrical Contractor's Company Name Telephone  
167 STONEHENGE DR. DUNN N.C. 28334 parkerselectric2017@gmail.com  
 Address Email Address  
31658  
 License #

**Mechanical/HVAC Contractor Information**

Description of Work 3 TON ELECTRIC (HVAC) FOR SFD (1500 SQ. FT)  
Custom Heating & Air 910-892-8827  
 Mechanical Contractor's Company Name Telephone  
1001 DENIM DR. ERWIN N.C. 28339 halley.stewart.hs15@gmail.com  
 Address Email Address  
28699  
 License #

**Plumbing Contractor Information**

Description of Work PLUMBING W SEPTIC / PUBLIC WATER # Baths 2  
L.R. GOWER PLUMBING (BROADWAY) 919-820-0026  
 Plumbing Contractor's Company Name Telephone  
P.O. Box 764 BENSON N.C. 27504  
 Address Email Address  
7958  
 License #

**Insulation Contractor Information**

Cumberland Insulation 910-484-7118  
 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 of Owner/Contractor/Officer(s) of Corporation

7/9/19

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: Bob Tech (President) GCEO LLC    Date: 7/9/19