

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: SEA 2, LLC Date: 1/22/2020  
 Site Address: 2053 Hwy 55 W COATS, NC 27528 Phone: 919-649-6554  
 Subdivision: Derek SAVAGE Lot 1 Lot: 1  
 Description of Proposed Work: New Home Construction Total Job Cost: 168,950 including lot

**General Contractor Information**

SEA 2, LLC 919-649-6554  
 Building Contractor's Company Name Telephone  
3531 Chalybeate Springs Rd. Fuquay VARINA, Williamcuttin@gmail.com  
 Address Email Address  
67685 I NC 27526-6209  
 License #

**Electrical Contractor Information**

Description of Work Wirc New Home Service Size: 200 Amps T-Pole:  Yes  No  
DEAN Electric, LLC 919-669-0063  
 Electrical Contractor's Company Name Telephone  
2793 Baptist Grove Rd Austindeanelectric@gmail.com  
 Address Email Address  
29839-L Fuquay VARINA, NC 27526  
 License #

**Mechanical/HVAC Contractor Information**

Description of Work HVAL System  
AIR System Services, INC. 919 422-6084  
 Mechanical Contractor's Company Name Telephone  
2849 Smithfield Road Knightdale FWALL@air-system-services.com  
 Address Email Address  
14737 NC 27545  
 License #

**Plumbing Contractor Information**

Description of Work Plumbing New Home # Baths 2  
Wagner Plumbing, INC. 910-890-2299  
 Plumbing Contractor's Company Name Telephone  
555 Tirzah Dr. Lillington, NC 27546-  
 Address Email Address  
31576 7449  
 License #

**Insulation Contractor Information**

INSULATION, INC 919-772-9000  
 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.

Walter S. Givens m/m  
Signature of Owner/Contractor/Officer(s) of Corporation

1/22/2020  
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: Walter S. Givens m/m Date: 1/22/2020