



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 or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: WSP Farms, LLC Date: 5/20/2020
Site Address: 9093 NC 210 S Hwy Bonn Level, NC 28323 Phone: 919-924-1360
Subdivision: _____ Lot: _____
Description of Proposed Work: Home Total Job Cost: \$70,000.00

General Contractor Information

LC Contracting LLC (336) 415 - 4771
Building Contractor's Company Name Telephone
737 South Main Street Mount Airy NC 27030
Address ashleigh@lccontractingllc.com
Email Address
79548
License #

Electrical Contractor Information

Description of Work Wiring & Infrastructure Service Size: 600 less Amps T-Pole: Yes No
Hartz Electric
Electrical Contractor's Company Name Telephone 919-639-6851
7836 Hwy 55 S. Willow Spring, NC 27592
Address Email Address Hartzelectric@aol.com
233390
License #

Mechanical/HVAC Contractor Information

Description of Work Installation of HVAC System H-2 H-3
Total Systems Heating / Cooling
Mechanical Contractor's Company Name Telephone 910-436-3450
13341 NC-210 Spring Lake, NC 28390
Address Email Address service@total systems nc.com
28416
License # Service@total systems nc.com

Plumbing Contractor Information

Description of Work Plumbing Installation - Kitchen + Bath # Baths 1
Candens Plumbing
Plumbing Contractor's Company Name Telephone 919-669-4650
52 Butternutwood Ct. Fuquay Varney, NC 27526
Address Email Address CandensPlumbing@aol.com
18903
License #

Insulation Contractor Information

LC Contracting LLC
Insulation Contractor's Company Name & Address Telephone 336-415-4771

***NOTE: General Contractor / owner must fill out and sign the second page of this application.**

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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.

 Jair Lee
Signature of Owner/Contractor/Officer(s) of Corporation

 5/20/2020
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: *Jair Lee* General Contractor Date: 5/20/2020