



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: Joshua J. Christensen and Andrea E. Christensen Date: 11-17-2020

Site Address: 2489 NC 55 E Phone: 910-814-7082

Subdivision: N/A Lot: \_\_\_\_\_

Description of Proposed Work: Construction of new SFD Total Job Cost: \$ 300,000.00

**General Contractor Information**

Barefoot Building Company, L.L.C.  
Building Contractor's Company Name

(910) 890-3256  
Telephone

P.O. Box 1411, Coats, NC 27521  
Address

wrbarefoot@yahoo.com  
Email Address

81627  
License #

**HEATED SQ FT**

**GARAGE SQ FT**

**Electrical Contractor Information**

Description of Work installation of electrical system Service Size: 200 Amps T-Pole:  Yes  No

Wester + Pace Electric, Inc.  
Electrical Contractor's Company Name

(919) 499-5389  
Telephone

614 Leslie Rd., Sanford, NC  
Address

\_\_\_\_\_  
Email Address

U.12007  
License #

**Mechanical/HVAC Contractor Information**

Description of Work installation of HVAC system

J+M Heating + Air Condition Co., Inc  
Mechanical Contractor's Company Name

(910) 897-5501  
Telephone

724 Turlington Rd., Dunn, NC  
Address

\_\_\_\_\_  
Email Address

L. 17164  
License #

**Plumbing Contractor Information**

Description of Work installation of plumbing system # Baths 2 1/2

Fred Arthur Chris Lecuyer III  
Plumbing Contractor's Company Name

(910) 670-1925  
Telephone

115 Keyman Drive, Coats, NC 27521  
Address

\_\_\_\_\_  
Email Address

L. 30173  
License #

**Insulation Contractor Information**

Stephens Building Products, LLC  
Insulation Contractor's Company Name & Address

910-630-8365  
Telephone

1200 Corporation Pkwy. Suite 121, Raleigh, NC 27610

**\*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

11-17-2020  
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: [Signature], Member Manager    Date: 11-17-2020