



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: Caviness & Cates Building and Development Company Date: 7/21/20  
Site Address: 491 Falls Creek Drive Phone: (910) 778-7902  
Subdivision: Crossings @ Anderson Creek Lot: 95  
Description of Proposed Work: new construction residential Total Job Cost: \$258,000

**General Contractor Information**

Caviness & Cates Building and Development Company (910) 778-7902  
Building Contractor's Company Name Telephone  
639 Executive Place Ste 400 Fayetteville, NC 28305 pam@cavinessandcates.com  
Address Email Address  
59586  
License #

**Electrical Contractor Information**

Description of Work new residential/new system Service Size: 200 Amps T-Pole:  Yes  No  
Parnell Electric Inc (910) 237-2751  
Electrical Contractor's Company Name Telephone  
6400 Allie Cooper Road Godwin, NC 28344 parnellelectric@gmail.com  
Address Email Address  
24236  
License #

**Mechanical/HVAC Contractor Information**

Description of Work new residential/new system  
Carolina Comfort Air (910) 339-2374  
Mechanical Contractor's Company Name Telephone  
PO Box 699 Dunnm BC rebecca@carolinacomfortair.com  
Address Email Address  
32825  
License #

**Plumbing Contractor Information**

Description of Work new residential/new system # Baths \_\_\_\_\_  
Thornton's Plumbing (919) 550-4833  
Plumbing Contractor's Company Name Telephone  
3160 A. Vinson Road Clayton, NC 27520 thorntonsplumbing@embarqmail.com  
Address Email Address  
22152  
License #

**Insulation Contractor Information**

Cumberland Insulation 4205 Clinton Road Fayetteville, NC 28312 (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.

Patricia M. Seddy for Cousins 7/21/20  
 Signature of Owner/Contractor/Officer(s) of Corporation Date  
*Catls*

**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: vice president [Signature] Date: 7/21/20