



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: Lloyd Landry Date: 2-1-2021  
Site Address: Rossor Pittman Road Phone: 910-624-8354  
Subdivision: \_\_\_\_\_ Lot: 1  
Description of Proposed Work: New House Total Job Cost: 299,000.00

**General Contractor Information**

Landry Homes LLC Telephone: 910-850-0984  
Building Contractor's Company Name  
2031 Devils Postarch Rd, Four 0965 Telephone: Ryan Landry 90@gmail.com  
Address Email Address  
73770 HEATED SQ FT 2219 GARAGE SQ FT 486  
License #

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size: 200 Amps T-Pole:  Yes  No  
Allman Electrical Telephone: 919-443-9694  
Electrical Contractor's Company Name  
345 Wilkes Road Fayetteville  
Address Email Address  
6136-U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_  
Certified Heating + Air Telephone: 910-858-0000  
Mechanical Contractor's Company Name  
207 W. David Parnell, Parnell NC  
Address Email Address  
20613  
License #

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths: 2 1/2  
McDonald Plumbing Telephone: 919-770-0773  
Plumbing Contractor's Company Name  
5221 Swan Station Rd  
Address Email Address  
11824  
License #

**Insulation Contractor Information**

Cumberland Insulation Telephone: 910-391-1528  
Insulation Contractor's Company Name & Address

\*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

2-1-2021  
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]* *[Signature]* Date: 2-1-2021