

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

Application for Residential Building and Trades Permit

n on license.	<i>l</i> 1
Owner's Name: GREAT SOUTH BUILD	ERS, INC. Date: 03/30/2025
Site Address: 89 LAKEFOREST TRL. SAM	FORD, NC Phone: 919669 4273
Subdivision: CAROLINA LAKES	Lot: 158-0"
Description of Proposed Work: NEW S.F. HOME / ATT	. GAMAGE Total Job Cost: 200,000,00
General Contractor In	formation
GREAT SOUTH BUILDERS, INC	919 669 4273
Building Contractor's Company Name	Telephone
2415 GUM SPRINGS CHURCH RD	GREAT SOUTHBUILDERS@ GMAIL.COM
Address PITTS BORD, NC 27	
87371	
License #	of a war at land
Description of Work NEW RES, Electrical Contractor I	vice Size: 200 Amns T-Pole: X Yes No
RSTELECTRIC	9192918766
Electrical Contractor's Company Name	Telephone
3432 ZACKS MILL RD. BNG/ERING	
Address	Email Address
26207-I	
License #	
Mechanical/HVAC Contrac	
Description of Work NEW RES. CONST. S.F. H	DIME DUCTED HEAT PUMP
CERTIFIED HEATING+ HIR CONDITIONING	910 858 0000
Mechanical Contractor's Company Name	Telephone
P.P. BOX 1071 HOPE MILLS, NC 283	48 CERTIFIED HEATINGANDAHRLLCG
Address	Email Address GMAIL-(OM
20012	
License #	
Plumbing Contractor I	2
Description of Work NEW RES. S.F. CONSTRUCTI	
	919 8200026
Plumbing Contractor's Company Name	Telephone
L.R. GLOVER PLUMBING LO., INC.	
Address	Email Address
P1-07958	
License #	
insulation Contractor I	Mormation and 481 885
TRI-CITY IN SULATION + BUILDING PRODUCTS OF	thyE112 410 106 0005
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.

03/30/2015

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
General Contractor	
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: B1/ PRSS. Date: 03/30/2025	