



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: Brian Corn Date: 5/13/21  
Site Address: 903 Rollins Mill Rd Holly Springs NC 27540 Phone: 919-730-7802  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: New Home Total Job Cost: 300,000

**General Contractor Information**

Stephens Builders Inc. Telephone: 919 730 7802  
Building Contractor's Company Name  
460 Ashley Road Fuquay NC Email Address: drew@stephensbuilders.com  
Address  
53604 HEATED SQ FT 3057 GARAGE SQ FT 978  
License #

Premise # 43077434

**Electrical Contractor Information**

Description of Work: New Home Service Size: 200 Amps T-Pole:  Yes  No  
Dean Electrical LLC Telephone: 919 669 0063  
Electrical Contractor's Company Name  
2793 Baptist Grav Rd. Fuquay NC Email Address: \_\_\_\_\_  
Address  
L 29839  
License #

**Mechanical/HVAC Contractor Information**

Description of Work: New Home  
JC HVAC Telephone: 919 552 3053  
Mechanical Contractor's Company Name  
1539 Wade Stephens Rd. Holly Springs Email Address: \_\_\_\_\_  
Address  
12655  
License #

**Plumbing Contractor Information**

Description of Work: New Home  
Commodore Plumb. # Baths: 3.5  
Plumbing Contractor's Company Name Telephone: 919 557 1584  
7229 Oak Village Way Fuquay NC Email Address: \_\_\_\_\_  
Address  
18903  
License #

**Insulation Contractor Information**

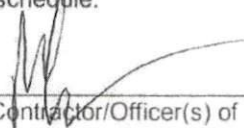
Stephens Building Products Telephone: 919 630 8365  
Insulation Contractor's Company Name & Address

\*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 of Owner/Contractor/Officer(s) of Corporation

5/13/21  
 \_\_\_\_\_  
 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:

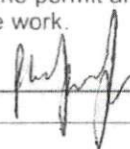
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  President

Date: 5/13/21