



Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

* 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: TLE HOMOS, LLC Date 9-17-21
Site Address: PIN # 1611-27-6401.000 Phone 919-247-5920
Subdivision: _____ Lot 3B
Description of Proposed Work: NEW HOME CONSTRUCTION Total Job Cost \$415,000⁰⁰

General Contractor Information

TLE HOMOS, LLC 919-247-5920
Building Contractor's Company Name Telephone
3924 PHLOX RD. RALPH, NC, 27614 TEDWARDSNC@GMAIL.COM
Address Email Address
NC 27100 HEATED SQ FT 2717 GARAGE SQ FT 481
License #

Electrical Contractor Information

Description of Work COM ELECTRIC Service Size: _____ Amps T-Pole: Yes No
NEW HOME CONSTRUCTION 919-772-4518
Electrical Contractor's Company Name Telephone
P.O. Box 1888 CLAYTON, NC, 27528 SHANE@CANDMELC.COM
Address Email Address
5689-L
License #

Mechanical/HVAC Contractor Information

Description of Work NEW HOME CONSTRUCTION
STEPHANSON HEATING & AIR 919-329-0686
Mechanical Contractor's Company Name Telephone
345 SHIPWASH DR. CAROLINA, NC, 27529 STEPHANSONHVAC@AOL.COM
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work NEW HOME CONSTRUCTION # Baths 2 1/2
DAVID BAKIN PLUMBING 919-404-2000
Plumbing Contractor's Company Name Telephone
208 WILSON, NC, 27597 DBAKINPLUMBING@AOL.COM
Address Email Address
8704
License #

Insulation Contractor Information

STEPHONS BUILDING SUPPLY 919-937-8479
Insulation Contractor's Company Name & Address Telephone
1200 CORPORATION PKWY. RALPH, 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.

Jimmy Stull PRESIDENT
Signature of Owner/Contractor/Officer(s) of Corporation

9-17-21
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: *Jimmy Stull* PRESIDENT Date: 9-17-21