



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: Alfred Timothy Goodwin Date 10-28-21  
Site Address: \_\_\_\_\_ Phone 910-658-0248  
Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work: New Dwelling Total Job Cost \$225,000

**General Contractor Information**

ATG Development LLC 910-658-0248  
Building Contractor's Company Name Telephone  
283 Chesley Ln, Lillington, NC tim@fcr-nc.com  
Address Email Address  
82236 HEATED SQ FT \_\_\_\_\_ GARAGE SQ FT \_\_\_\_\_  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work New Wiring Service Size: 200 Amps T-Pole:  Yes  No  
Patrick Electrical Contractors 910-658-1594  
Electrical Contractor's Company Name Telephone  
1309 N MAIN ST, Lillington, NC Tommy.patrick910@gmail.com  
Address Email Address  
49104  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work Install New System  
Young's Electric 919-868-7304  
Mechanical Contractor's Company Name Telephone  
10590 NC 210, Angier, NC  
Address Email Address  
20633  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work New Plumbing # Baths 2 1/2  
Young's Electric 919-868-7304  
Plumbing Contractor's Company Name Telephone  
10590 NC 210, Angier, NC  
Address Email Address  
20633  
License # \_\_\_\_\_

**Insulation Contractor Information**

Cumberland Insulation Inc. 4205 910-484-7118  
Insulation Contractor's Company Name & Address Telephone  
Clinton Rd. Fayetteville

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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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.

Tim Sordun  
Signature of Owner/Contractor/Officer(s) of Corporation

10-28-21  
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: Tim Sordun, Pres. Date: 10-28-21