



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: Shannon & Leanne Holland Date: 4-4-2022
Site Address: 1663 Crawford Road Coats NC Phone: 919-369-5789
Subdivision: n/a Lot:
Description of Proposed Work: build residential home Total Job Cost: \$ 375,000.00

General Contractor Information

Building Contractor's Company Name: Shannon & Leanne Holland Telephone: 919-235-2982 or 919-369-5789
Address: [redacted] 2834 [redacted] Email Address: [redacted] 768
License #: [redacted]

Electrical Contractor Information

Description of Work: New S.F. Dwelling Service Size: 200 Amps T-Pole: [checked] Yes ___ No
Electrical Contractor's Company Name: Wester & Pace Electric Telephone: 919-499-5389
Address: 546 Leslie Dr. Sanford NC Email Address: n/a
License #: 12007-U

Mechanical/HVAC Contractor Information

Description of Work: New S.F. Dwelling
Mechanical Contractor's Company Name: Stephenson's Heating & Air Telephone: 919-329-0686
Address: 343 Shipwash Dr. Garner NC Email Address:
License #: 18644

Plumbing Contractor Information

Description of Work: New S.F. Dwelling # Baths:
Plumbing Contractor's Company Name: David Baker Plumbing Telephone: 919-422-5920
Address: 2243 Hwy 39 Zebulon NC Email Address:
License #: 8704

Insulation Contractor Information

Insulation Contractor's Company Name & Address: Tatum Insulating Telephone: 919-661-0999

*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.

Leanne B. Holland
Signature of Owner Contractor/Officer(s) of Corporation

4-4-2022
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: Leanne B. Holland | Owner Date: 4-4-2022