



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: Van Frizzelle Date 9-1-22  
Site Address: 695 Roberts Road Phone \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work: New Home Total Job Cost 245,000

**General Contractor Information**

Glenn Godfrey Telephone 919 770 0776  
Building Contractor's Company Name  
PO Box 2399 Sanford Email Address southernwindstream.net  
Address 16111 HEATED SQ FT 1625 GARAGE SQ FT 425  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work New Home Service Size: 200 Amps T-Pole:  Yes  No  
Wicker Electric Telephone 919 520 0472  
Electrical Contractor's Company Name  
454 Womack Lake Rd Sanford Email Address \_\_\_\_\_  
Address 10908  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work New Home Telephone 919 555 2500  
Center Heat  
Mechanical Contractor's Company Name  
511 E Main St Sanford Email Address \_\_\_\_\_  
Address L 04627  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work New # Baths 2  
Reliable Plumbing Inc Telephone 919 775 5782  
Plumbing Contractor's Company Name  
1480 Zion Church Road Email Address \_\_\_\_\_  
Address Sanford NC 27330  
License # 7151

**Insulation Contractor Information**

Insulation Installers Sanford Telephone 919 770 1974  
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]*  
Signature of Owner/Contractor/Officer(s) of Corporation

9-1-22  
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: *[Signature]* Owner    Date: 9-1-22  
Builder