

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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

Application for Residential Building and Trades Permit

Owner's Name: Southeastern Design and Construction, Inc	Date 07-18-22	
Site Address: 401 D L Phillips Lane, Broadway, NC 27505	Phone 910-309-4230	
Subdivision: James Robertson Subdivision	Lot 15	
Description of Proposed Work: New Residential Construction	_ Total Job Cost <u>\$273,540</u>	
General Contractor Information		
Southeastern Design and Construction, Inc	910-309-4230	
Building Contractor's Company Name	Telephone	
110 Missy Byrd Drive, Hope Mills, NC 28348	deanna@sedc-inc.com	
Address	Email Address	
61752 - Unclassified/Unlimited HEATED SQ FT 2284 GARAGE SQ	_{FT} 637	
License #		
Electrical Contractor Information		
·	200 Amps T-Pole: ✓ Yes No	
Glemaker Electric Electrical Contractor's Company Name	910-425-4915 Telephone	
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5755 Crenshaw Dr, Hope Mills, NC Address	glemaker1@embarqmail.com Email Address	
13202-U	Email Address	
License #		
Mechanical/HVAC Contractor Information	ation	
Description of Work install (1) 3.5 Ton 14 Seer split heat pump system zoned		
Certified Heating and Air	910-858-0000	
Mechanical Contractor's Company Name	Telephone	
PO Box 1071, Hope Mills, NC 28348	certifiedheatingandairllc@gmail.com	
Address	Email Address	
20012H3-1		
License #		
Plumbing Contractor Information		
Description of Work Install plumbing system per code	# Baths 2.5	
Larry Lee Plumbing	910-237-3790	
Plumbing Contractor's Company Name	Telephone	
7051 Crest Street, Fayetteville, NC 28306	service.lps@yahoo.com	
Address	Email Address	
5274 P-1		
License #		
Insulation Contractor Information		
Cumberland Insulation	910-484-7118	
Insulation Contractor's Company Name & Address	Telephone	

*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.

Deanna Ham	07-18-22	
Signature of Owner/Contractor/Officer(s) of Corporation	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: Deanna Ham Project Coordin	ator Date: 07-18-22	