

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: Frances Tew		Date	1/9/2023	
Site Address: 466 George Perry Lee Road, Dunn, NC 28334	Phone			
Subdivision:	Lot			
Rebuild NC Project: replacing old home with new, site built home	Total Job Cost	\$213	3,980.00	
General Contractor Information				
Nash Locklear Construction Company	(910) 734-71	128		
Building Contractor's Company Name	Telephone			
13 3 West Carthage Road, Lumberton, NC 28360				
Address	Email Address			
44032 HEATED SQ FT 1646 GARAGE SQ	FT			
License #				
Description of Work Service Size:Amps T-Pole:YesNo				
	(910) 740-2		_165100	
		231	,	
3122 Burgaw HWY - Lot 20, Jacksonville, NC 28540 Max		364	/	
	Email Address			
L. 3 637 Adam Spencer Jones	Lillali Address			
Licerse #				
Mechanical/HVAC Contractor Information	ation_			
Description of Work				
Derek Drummond C12 HVAC+ General	(910) 798-5	5086		
Mechanical Contractor's Company Name Centracting	Telephone			
342 Blue Road, Parkton, NC 28371				
Address	Email Address			
Ų.15247				
License #				
Plumbing Contractor Information	1			
Description of Work	_# Baths		_	
Oral's Construction Company, Inc.	(910) 280-2	825		
Plumbing Contractor's Company Name	Telephone			
199 Hibiscus Lane, Red Springs, 28377				
Address	Email Address			
30344				
License #				
Insulation Contractor Information	T.			
Best Way Insulation - 828 Walnut Street, Fairmont, NC 28340 Insulation Contractor's Company Name & Address	(910) 628-9	9243		
Insulation Contractor's Company Name & Address	relephone			

*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.

Sheena Ibasco	1/12/23		
Signature of Owner/Contractor/Officer(s) of Corporation	Date		
Affidavit for Worker's Compens	sation N.C.G.S. 87-14		
The undersigned applicant being the:			
General Contractor Owner X Office	er/Agent of the Contractor or Owner		
Do hereby confirm under penalties of perjury that the person(s set for h in the permit:), firm(s) or corporation(s) performing the work		
Has three (3) or more employees and has obtained wor	rkers' compensation insurance to cover them.		
Has one (1) or more subcontractors(s) and has obtained them.	d workers' compensation insurance to cover		
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 Department issuing the permit may require certificates of cove to issuance of the permit and at any time during the permitted carrying out the work.	rage of worker's compensation insurance prior		
Sign w/Title: Sheena Ibasco	Date:_1/12/23		