



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: BRIAN + TERRI HESSELTINE Date 8/10/22
Site Address: CAPTAIN HARBOR SANFORD, NC 27334 Phone 919-274-5322
Subdivision: CAROLINA LAKES Lot 42 Bck K PH IV
Description of Proposed Work: NEW SINGLE FAMILY RES. Total Job Cost 354,000

General Contractor Information

LJ Clark, LLC 919-422-7306
Building Contractor's Company Name Telephone
Po Box 1013 Clayton, NC 27520 LCLARK@LJCLARKLLC.COM
Address Email Address
51481 HEATED SQ FT 2495 GARAGE SQ FT 424
License #

Electrical Contractor Information

Description of Work NEW SINGLE FAMILY Service Size: _____ Amps T-Pole: Yes No
TOOL TIME SERVICES 919-274-3234
Electrical Contractor's Company Name Telephone
PO BOX 2207 GARNER, NC 27529 JIM.WANDLAND.IT5@GMAIL.COM
Address Email Address
30306-01
License #

Mechanical/HVAC Contractor Information

Description of Work NEW SINGLE FAMILY
SPEEDY ENROLLMENT 919-931-5700
Mechanical Contractor's Company Name Telephone
1415 WAIT AVE WAKE FOREST, NC INDIGILES@SPEEDYENROLLMENT.COM
Address Email Address
27587
30716
License #

Plumbing Contractor Information

Description of Work NEW SINGLE FAMILY # Baths 3.5
BARBARA PERAZON 919-422-6367
Plumbing Contractor's Company Name Telephone
114 LEE CT CLAYTON, NC 27520 JEROME@BPPLUMBING.COM
Address Email Address
27132
License #

Insulation Contractor Information

LIVE GREEN, INC 919 453 6411
Insulation Contractor's Company Name & Address Telephone
500 OLD POOLE RD. RALEIGH, NC 27610

***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 of Owner/Contractor/Officer(s) of Corporation

8/16/22

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:  PRESIDENT Date: 8/16/22