



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: KEVIN & SANDRA McCUE Date 06 MARCH 2023
Site Address: 2595 LINE Rd. CAMERON, N.C. Phone 910 987 5127
Subdivision: N/A Lot N/A
Description of Proposed Work: NEW HOME CONSTRUCTION Total Job Cost 350,000.00

General Contractor Information

OWNER KEVIN & SANDRA McCUE KEVIN SANDRA
Building Contractor's Company Name 910 987 5127 or 910 280 8016 Telephone
230 MAPLEWOOD DR. SANFORD, N.C. 27332 McCUEK123@gmail.com Email Address
N/A **HEATED SQ FT** 2972 **GARAGE SQ FT** 777
License #

Electrical Contractor Information

Description of Work Elect T-Pole & Rough in Service Size: 200 Amps T-Pole: Yes No
JF Douglas Electric 919 498 4547
Electrical Contractor's Company Name Telephone
1690 Lydia PERRY Rd BEAR CREEK, NC Email Address
15653 L
License #

Mechanical/HVAC Contractor Information

Description of Work ~~SureTemp~~ INSTALL HVAC Duct & System / START UP.
SureTemp MECHANICAL 919 777 0668
Mechanical Contractor's Company Name Telephone
3105 HAYSILER DR SANFORD, N.C. Email Address
19738 27332
License #

Plumbing Contractor Information

Description of Work Plumbing rough in # Baths 3.5
OWNER - SELF Kevin McCue 910 987 5127
Plumbing Contractor's Company Name Telephone
230 MAPLEWOOD DR SANFORD, N.C. McCUEK123@gmail.com Email Address
N/A 27332
License #

Insulation Contractor Information

INSULATING NC. 919 776 4138
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.

Karin M. McCee Sandra McCee
Signature of Owner/Contractor/Officer(s) of Corporation

03-06-23
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: *Mr Karin M. McCee Sandra McCee* Date: 03-06-23