



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: David & Margaret Cannell Date 3-8-23
Site Address: 6573 Old US 421 Lillington Phone 919 906 4069
Subdivision: _____ Lot _____
Description of Proposed Work: Site built House + Shop Total Job Cost 300,000.00

General Contractor Information

Clifford Steve Thomas 919 906 4069
Building Contractor's Company Name Telephone
PO Box 875 Broadway 27505 Southern concrete@windstream.net
Address Email Address
59452 **HEATED SQ FT 1650** **GARAGE SQ FT 576**
License #

Electrical Contractor Information

Description of Work New House Service Size: 200 Amps T-Pole: Yes No
Wester & Pace 919 499 3946
Electrical Contractor's Company Name Telephone
614 Leslie Rd Sanford 27332
Address Email Address
12007-U
License #

Mechanical/HVAC Contractor Information

Description of Work New House
Affordable Heating & Air 919 498 2791
Mechanical Contractor's Company Name Telephone
PO Box 326 Lemon Springs 28355
Address Email Address
20046
License #

Plumbing Contractor Information

Description of Work New House # Baths 2
Double J Plumbing 910 814 7705
Plumbing Contractor's Company Name Telephone
614 Byrd Rd Bunnlevel 28323
Address Email Address
21649
License #

Insulation Contractor Information

Tatum Insulation 919 661 0999
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.

Steve Thomas
Signature of Owner/Contractor/Officer(s) of Corporation

3-8-23
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: Steve Thomas / Owner Date: 3-8-23