



Application # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. 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: Corey Ammons Date: \_\_\_\_\_  
Site Address: \_\_\_\_\_ Phone: 919 820 3726  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: new construction SFID Total Job Cost: \_\_\_\_\_

General Contractor Information

SMITH WOODWORKS Inc. 910 890 2923  
Building Contractor's Company Name Telephone  
#11607 Clayhole Rd. Dunn. 28334 scsmith@yahoo.com  
Address Email Address  
85821 HEATED SQ FT 2668 GARAGE SQ FT 980  
License #

Electrical Contractor Information

Description of Work Electrician Service Size: \_\_\_\_\_ Amps T-Pole:  Yes  No  
Byrds electric + repair service inc. 919 669 3843  
Electrical Contractor's Company Name Telephone  
143 mingo rd benson NC 27504  
Address Email Address  
20256-L  
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC - new construction  
Beasley's Heating + Air inc 919 894 4248  
Mechanical Contractor's Company Name Telephone  
57 W C Beasley Ln, Coats, NC Beasleyshvac@aol.com  
Address Email Address  
9497  
License #

Plumbing Contractor Information

Description of Work Plumbing - new construction # Baths \_\_\_\_\_  
JEREMY WILLIFORD Plumbing 919 915 0533  
Plumbing Contractor's Company Name Telephone  
805 JERIGAN LOOP RD DUNN NC 28334 Jobphone123@icloud.com  
Address Email Address  
30747  
License #

Insulation Contractor Information

TATUM'S INSULATION  
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.

*Craig Amundson*  
Signature of Owner/Contractor/Officer(s) of Corporation

6/15/23  
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: *Craig Amundson*

Date: 6/15/23