



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: Southern Tide Homes \_\_\_\_\_ Date 10/26/2023

Site Address: 143 Hook Dr Fuquay Phone \_\_\_\_\_  
(919) 369-7804

Subdivision: Cotton Farms Lot 23

Description of Proposed Work: New Const - SFD Total Job Cost \$330,000

**General Contractor Information**

Southern Tide Homes, LLC (919) 369-7804  
Building Contractor's Company Name Telephone  
11917 NC HWY 210 Benson NC 27504 Clay@southerntidehomes.net  
Address Email Address

81327 HEATED SQ FT 2634 GARAGE SQ FT 552  
License #

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size: 200 Amps T-Pole:  Yes  No

Common Ground Electric (919) 478-3092  
Electrical Contractor's Company Name Telephone  
222 Fox Run Ct Benson NC 27504 commongroundelectricnc@gmail.com  
Address Email Address

32654  
License #

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_

My HVAC Guys 919-938-8202  
Mechanical Contractor's Company Name Telephone  
304 Stotts Mill Rd Wendell NC 27591 brandon.baker@myhvacguysnc.com  
Address Email Address

84239  
License #

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths 2

Danny Sullivan Plumbing Inc (919) 669-8860  
Plumbing Contractor's Company Name Telephone  
P.O. Box 943 Coats NC 27521 danksul2@gmail.com  
Address Email Address

22163  
License #

**Insulation Contractor Information**

Stephens Building Products1200 Corporation PKWY Suite 121 Raleigh NC 27615  
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.**

Clayton Roberts  
Signature of Owner/Contractor/Officer(s) of Corporation

10/26/23  
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: Clayton Roberts Member Date: 10/26/23