



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: Brendan Sweck Date 9/13/23  
Site Address: 115 Ithica Ln, Bunnlevel Phone 919-717-8223  
Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work: New construction single family Total Job Cost 375,000

**General Contractor Information**

Simfonie Construction, LLC 919-227-6887  
Building Contractor's Company Name Telephone  
1108 Bermuda Run, Knightdale, NC 27545 kristian248@gmail.com  
Address Email Address  
L.79375 **HEATED SQ FT 3302** **GARAGE SQ FT 1044**  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work Rough-in and final service Service Size: 200 Amps T-Pole:  Yes  No  
Rasool Electrical and Construction 919-271-4490  
Electrical Contractor's Company Name Telephone  
2612 Elmhurst Circle, Raleigh, NC 27610 rasoolelectricconstruction@gmail.com  
Address Email Address  
U16507  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work Rough-in and final service  
HVAC R US 919-671-7878  
Mechanical Contractor's Company Name Telephone  
5012 Harts Field Dr, Wake Forest, NC 27587 hvacrus@bellsouth.net  
Address Email Address  
L 18423  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work Rough-in and final service # Baths 4  
Thornton's Plumbing 919-550-4833  
Plumbing Contractor's Company Name Telephone  
3160 A Vinson Rd. Clayton, NC 27527  
Address Email Address  
L.22152  
License # \_\_\_\_\_

**Insulation Contractor Information**

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.**

Murad Fonville  
Signature of Owner/Contractor/Officer(s) of Corporation

9/13/23  
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: Murad Fonville Date: 9/13/23