



Harnett COUNTY NORTH CAROLINA

Application # SFD 2309-0088

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 or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Bill + Beth Alsobrook Date: 11-27-23  
Site Address: M'Dougal Rd. Phone: 919 906 4069  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: New House

**General Contractor Information**

Steve Thomas Telephone: 919 906 4069  
Building Contractor's Company Name  
PO 875 Broadway NC 27505 Email Address: Southernconcrete@  
Address: \_\_\_\_\_ WindStream.net  
59452  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work: New Const. Service Size: 200 Amps T-Pole:  Yes  No  
Wester + Pace Telephone: 919 499 3946  
Electrical Contractor's Company Name  
465 Leslie Rd Sanford NC 27330 Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
12007-U  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work: New Const.  
Affordable Heating + Air Telephone: 919 499 2791  
Mechanical Contractor's Company Name  
PO 326 Lemon Springs NC 28355 Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
20046  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work: New Const. # Baths: \_\_\_\_\_  
Double J Plumbing Telephone: 910 914 7705  
Plumbing Contractor's Company Name  
614 Byrd Rd Bunnlevel NC 28323 Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
21649  
License # \_\_\_\_\_

**Insulation Contractor Information**

Tatum's Insulation Telephone: 919 661 0999  
Insulation Contractor's Company Name & Address  
579 Old Drug Store Rd. Garner NC 27529

**\*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

11-27-23  
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 / Builder Date: 11-27-23