



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: Kenneth McGlothlin Const. Inc. Date 11-17-23
Site Address: _____ Phone 919-669-7026
Subdivision: Spring Hill Church Rd Lot 3
Description of Proposed Work: New SFD Total Job Cost 170,000

General Contractor Information

Kenneth McGlothlin Const. Inc. 919-669-7026
Building Contractor's Company Name Telephone
97 Shooting Star Ln Fuquay Varina NC 27526 Kmci.nc.kenneth@gmail.com
Address Email Address
101793 HEATED SQ FT 1421 GARAGE SQ FT NA
License #

Electrical Contractor Information

Description of Work New SFD Service Size: 200 Amps T-Pole: Yes No
Alpha 8 Omega Electrical NC LLC 919-669-3418
Electrical Contractor's Company Name Telephone
1084 Lake Ridge Dr. Creedmoor NC 27522 ludwigelectrical@gmail.com
Address Email Address
24828
License #

Mechanical/HVAC Contractor Information

Description of Work New SFD
Certified Heating and Air 910-858-0000
Mechanical Contractor's Company Name Telephone
P.O. Box 1071 Hope Mills NC 28348 CertifiedHeatAir@gmail.com
Address Email Address
20012 H2C1
License #

Plumbing Contractor Information

Description of Work New SFD # Baths _____
Thornton's Plumbing Inc. 919-550-4833
Plumbing Contractor's Company Name Telephone
3160 - A Vinson Rd. Clayton NC 27527 TPIoffice2@gmail.com
Address Email Address
22152
License #

Insulation Contractor Information

Tatum Insulation II Garner NC 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.


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

11-17-23
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:  president Date: 11-17-23