



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: Mary Nell Bradley Hamilton Date: 11/17/23  
Site Address: 11 Keith Weathers Rd., Fuquay Varina Phone: 910-591-9959  
Subdivision: N/A Lot: Daughter-Jennifer  
Description of Proposed Work: New Construction Home Total Job Cost: \$350,000

**General Contractor Information**

Caston Construction Company 919-669-8729  
Building Contractor's Company Name Telephone  
1008 S. Clinton Ave castoncc@gmail.com  
Address Email Address  
L.77043 HEATED SQ FT 2029 GARAGE SQ FT 420  
License #

**Electrical Contractor Information**

Description of Work NC Service Size: 200 Amps T-Pole:  Yes  No  
Parker's Electric 910-984-6810  
Electrical Contractor's Company Name Telephone  
167 Stonehenge Dr., Dunn, NC 28334 Parker'sElectric2017@  
Address Email Address gmail.com  
31658  
License #

**Mechanical/HVAC Contractor Information**

Description of Work NC  
J&M Heat & Air 910-897-5501  
Mechanical Contractor's Company Name Telephone  
724 Turlington Rd., Dunn, NC 28334 JandMHVAC@centurylink.com  
Address Email Address  
17164  
License #

**Plumbing Contractor Information**

Description of Work NC # Baths 2.5  
Willford Plumbing 919-915-0533  
Plumbing Contractor's Company Name Telephone  
865 Jernigan Loop Rd., Dunn, NC 28334 jobphone123@icloud.com  
Address Email Address  
30747  
License #

**Insulation Contractor Information**

Parker Insulation 910-990-5928  
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:

Date: 11/17/23