



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: Elm Street Builders, LLC Date 2/7/2024
Site Address: 180 Pondhurst Lane Phone 252-814-1622
DVL Pondhurst
Subdivision: _____ Lot 5
Description of Proposed Work: New Single Family Dwelling Total Job Cost 520,000

General Contractor Information

Elm Street General Contractors 252-814-1622
Building Contractor's Company Name Telephone
3434 Kildaire Farm Road, Suite 240 Cary, NC 27518
agoins@elmstreetbldrs.com
Address Email Address
81154-U **HEATED SQ FT** 3180 **GARAGE SQ FT** 563
License #

Electrical Contractor Information

Description of Work New SFD Dwelling Service Size: 200 Amps T-Pole: Yes No
W3 Electric 919-550-7341
Electrical Contractor's Company Name Telephone
308 A W Main St Clayton, NC 27520
greg.hengle@w3electric.com
Address Email Address
11452-U
License #

Mechanical/HVAC Contractor Information

Description of Work New SFD Dwelling
Biggs Heating and Air Conditioning LLC 919-329-8288
Mechanical Contractor's Company Name Telephone
298 Shipwash Dr Garner, NC 27529
shantelledriver@biggshvac.com
Address Email Address
19100
License #

Plumbing Contractor Information

Description of Work New SFD Dwelling # Baths 3.5
Barbour and Pourron Plumbing 919-553-4455
Plumbing Contractor's Company Name Telephone
PO Box 934 Clayton, NC 27528
jeromy@bpplumbing.com
Address Email Address
27132-U
License #

Insulation Contractor Information

Will Cee Insulation 919-457-3989
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.

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

2/7/2024
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: Christopher Weir Date: 2/7/2024