



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: Cory & Jenn Webster Date 5-30

Site Address: 882 Cameron Hill Rd. 9565-92-2690 Phone 620-617-7080

Subdivision: _____ Lot _____

Description of Proposed Work: Site built SFD Total Job Cost 197,000

General Contractor Information

ValueBuild Homes
Building Contractor's Company Name

919-777-0393
Telephone

3015 Jefferson Davis Hwy Sanford
Address

taryn@valuebuildhomes.com
Email Address

55372
License #

HEATED SQ FT 1515 GARAGE SQ FT N/A

Electrical Contractor Information

Description of Work Electrical for SFD Service Size: 200 Amps T-Pole: Yes No

Wester & Pace
Electrical Contractor's Company Name

919-499-5389
Telephone

614 Leslie Rd. Sanford NC 27332
Address

william.wester@gmail.com
Email Address

12007
License #

Mechanical/HVAC Contractor Information

Description of Work All mechanical for SFD

Certified Heating & Air
Mechanical Contractor's Company Name

910-858-0000
Telephone

PO Box 1071 Hopewills NC 28348
Address

larrycp000@gmail.com
Email Address

26012
License #

Plumbing Contractor Information

Description of Work Plumbing for SFD # Baths 2

Baity Plumbing
Plumbing Contractor's Company Name

336-476-0713
Telephone

4538 Lower Lake Rd. Thomasville NC
Address

tdbaityplumbing@gmail.com
Email Address

20809
License #

Insulation Contractor Information

Tri City Insulation
Insulation Contractor's Company Name & Address

910-486-8855
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

5.30.24

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: Start coordinator

Date: 5/30/24