

## RESIDENTIAL BUILDING APPLICATION

Site Address: 130 Deer Tail Ln. PIN: 0643-27-4282 000  
Owner: Southern Tide Homes Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Description of Proposed Work: New single family home Total Job Cost: \$570,000

### GENERAL CONTRACTOR INFORMATION

\* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Reese Construction LLC  
General Contractor's Company Name  
3720 Lucky Dr. Apex NC 27539  
Address  
446666  
License #

(919) 329-5501  
Phone  
reeseconstruction@hotmail.com  
Email

### ELECTRICAL CONTRACTOR INFORMATION

Description of Work: New Electrical work  
Ogilvie Enterprises  
Electrical Contractor's Company Name  
5325 Hidwell Pl. Apex NC 27539  
Address  
17046-L  
License #

Service Size: \_\_\_\_\_ Amps T-Pole: YES ☒ NO ☐  
(919) 362-7000  
Phone  
admin@ogilvieelectric.com  
Email

### MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: New Mechanical work  
Duke's Heating + Air Conditioning  
Mechanical Contractor's Company Name  
7429 Old Bantom Rd. Raleigh NC  
Address  
22029  
License #

(919) 779-0498  
Phone  
cme4hvac@bellsouth.net  
Email

### PLUMBING CONTRACTOR INFORMATION

Description of Work: New plumbing work  
Wells Plumbing  
Plumbing Contractor's Company Name  
3304 Beech Bluff Ln. Raleigh NC  
Address  
23451  
License #

# of Fixtures: \_\_\_\_\_  
(919) 538-1035  
Phone  
wellsplumbingco@gmail.com  
Email

### INSULATION CONTRACTOR INFORMATION

Insulation Services  
Insulation Contractor's Company Name

(919) 478-7464  
Phone



I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

**EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.**

  
\_\_\_\_\_  
Signature of Owner/Contractor/Officer of Corporation

11/24/25  
\_\_\_\_\_  
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

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

- ☐ Has 3 or more employees and has obtained workers' compensation insurance to cover them,  
☐ Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,  
☒ Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,  
☐ Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

  
\_\_\_\_\_  
Signature of Owner/Contractor/Officer of Corporation

11/24/25  
\_\_\_\_\_  
Date