



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: PoP Homes – RDU, LLC Date 6-20-24

Site Address: 607 Wondertown Drive, Erwin Phone 919-525-5856

Subdivision: Chandler Place Lot 2

Description of Proposed Work: New Single Family Residence Total Job Cost \$ 125,463

**General Contractor Information**

PoP Homes-RDU, LLC 919-525-5856

Building Contractor's Company Name Telephone

117 Christopher Drive, Clayton NC 27520 patrick@mypophomes.com

Address Email Address

87042 HEATED SQ FT 1508 GARAGE SQ FT 438

License #

**Electrical Contractor Information**

Description of Work Wire new home Service Size: 200 Amps T-Pole: X Yes \_\_\_ No

W3 Electric Inc 919-550-7341

Electrical Contractor's Company Name Telephone

308 W Main St STE A Clayton NC 27528 siones@w3electric.com

Address Email Address

U.34522

License #

**Mechanical/HVAC Contractor Information**

Description of Work HVAC new home

Comfort Air, Inc. 336-794-9730

Mechanical Contractor's Company Name Telephone

PO Box 552 Clemmons, NC 27012 kayaustinatac@outlook.com

Address Email Address

L-4218

License #

**Plumbing Contractor Information**

Description of Work Plumb new home # Baths 2.5

Thornton's Plumbing, Inc 919-550-4833

Plumbing Contractor's Company Name Telephone

3160 A Vinson Rd Clayton, NC 27527 tpiplanner@gmail.com

Address Email Address

L.22152

License #

**Insulation Contractor Information**

TriCity Insulation 2701 Rowland Dr STE 300 Raleigh, NC 27615 252-243-4999

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.**

*Stephanie Purnley*  
Signature of Owner/Contractor/Officer(s) of Corporation

6-20-2024  
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: *Stephanie Purnley* Director of Marketing & Administration Date: 6-20-2024