



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 PermitOwner's Name: James and Leah Arendt Date 03/19/2025Site Address: 226 Mann Rd. Coats, NC 27521 Phone (910) 729-1692

Subdivision: _____ Lot _____

Description of Proposed Work: New constrction home Total Job Cost 323,000**General Contractor Information**

Equestrian Building Solutions LLC 919-437-0616
Building Contractor's Company Name Telephone
9241 Brogden Rd. Smithfield, NC 27577 equestrianbuildingsolutions@gmail.com
Address Email Address
99286 **HEATED SQ FT** 1735 **GARAGE SQ FT**
License #

Electrical Contractor Information

Description of Work Electric for new home Service Size: 200 Amps T-Pole: X Yes ___ No
Pigtail Electric LLC 919-915-2695
Electrical Contractor's Company Name Telephone
2018 Keith Lane Selma, NC 28576 pigtaillec@gmail.com
Address Email Address
36666
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC for new home
Crawford Mechanical Services 919-223-3022
Mechanical Contractor's Company Name Telephone
2788 Old Grantham Rd. Goldsboro, NC 27530 crawfordmechservices@gmail.com
Address Email Address
36215
License #

Plumbing Contractor Information

Description of Work Plumbing for new home # Baths 2
Karl John Schulze 919-538-1990
Plumbing Contractor's Company Name Telephone
7211 Paddock Dr. Raleigh, NC 27613 kschulze@aol.com
Address Email Address
29120
License #

Insulation Contractor Information

Southeast Atlantic Insulation 112 Laurel Ridge Dr. Clayton, NC 27520 919-763-2231
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.

Brandon Smith

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

03/19/2025

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

X 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.

X 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: Brandon Smith General Contractor Date: 03/19/2025