

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

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

Application for Residential Building and Trades Permit

Application for Residential Ballaning and 1	144551 511111
Owner's Name: Habitat for Humanity of Harrett C	Pate 4/9/2025
Site Address: 60 Gladiola Drive Spring Lake, WC	Phone 9/0-5/4-1766
Subdivision: Rolling Springs	Lot
Description of Proposed Work: Single Family	Total Job Cost \$ 146, 350, 16
General Contractor Information	
Southeastern Construction of Byles Cicek LLC	
Building Contractor's Company Name	Telephone
PO BUX 157, Buies Creek, NC 27506	910-893-8486 Telephone Sexemy @si-uc.com
Address	Email Address
62649 HEATED SQ FT 1370 GARAGE SI	QFT &
License # Electrical Contractor Information /	
Description of Work Wive New Single family Service Size:	Amps T-Pole: VYes No
Patricle Ebotrical Contractors HC Electrical Contractor's Company Name	10-893-5944 Telephone tommy Patrick 910 @ gmail.com Email Address
1309 N Main St. Lillington, WC 27546	tommy Patrick 910 @ gmail.com
Address (A () 4 9 1 0	Email Address
License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work HVAC Snylz Rum'y	
Beasley's Heating & Air Inc Mechanical Contractor's Company Name	9/9 868 5821 Telephone
	Telephone
57 WC Beasley LN Coats, WC 27321	w/A
Address J L09497	Email Address
License #	
Plumbing Contractor Information	
Description of Work New Plumbing Stl	# Baths
Brewington Plumbing	919-634-5464
Plumbing Contractor's Company Name	Telephone
Plumbing Contractor's Company Name 1637 lecs Union Church Ro for Outs NO Address 36036	Brewington Plumbing @ J. cov
Address 36036	Email Address
License #	
Insulation Contractor Information	
Voluntees 5	910-514-1766
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.

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

H 9 30 35

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: And Street of Secus un han Date: 419/2025	