

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: Wicker Construction Corp Date 12-30-24  
 Site Address: 27 Lookout PT. Phone 919-356-8585  
 Subdivision: Carolina Lakes Lot \_\_\_\_\_  
 Description of Proposed Work: New SFD Total Job Cost 300,000<sup>00</sup>

**General Contractor Information**

Wicker Construction Corp Telephone 919 356 8585  
 Building Contractor's Company Name  
2804 Corborton RD Sanford NC 27380 Email Address brittenwicker@shaw.com  
 Address  
63744 HEATED SQ FT 2400 GARAGE SQ FT 528  
 License #

**Electrical Contractor Information**

Description of Work SFD Service Size: 200 Amps T-Pole:  Yes  No  
Wester & Pace Electric Telephone 919-499-3946  
 Electrical Contractor's Company Name  
614 Leslie RD. Email Address \_\_\_\_\_  
 Address  
12007-G  
 License #

**Mechanical/HVAC Contractor Information**

Description of Work SFD  
Certified Hastings Air Conditioning Telephone 910-858-0000  
 Mechanical Contractor's Company Name  
PO. Box 1071 Hope Mills NC 28348 Email Address \_\_\_\_\_  
 Address  
H3C1-20012  
 License #

**Plumbing Contractor Information**

Description of Work SFD # Baths 3  
MoDonald Plumbing Telephone 919-770-0773  
 Plumbing Contractor's Company Name  
5321 Swanns Station RD Sanford NC Email Address \_\_\_\_\_  
 Address  
11824  
 License #

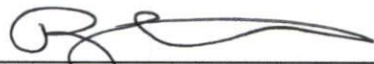
**Insulation Contractor Information**

Isatrum Insulation 519 Old Drugstore RD Telephone 919-661-0999  
 Insulation Contractor's Company Name & Address  
Garner NC 27529

**\*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

12-30-24  
\_\_\_\_\_  
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:  President    Date: 12-30-24