



CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

RESIDENTIAL BUILDING APPLICATION

Site Address: 984 West Strickland Rd PIN: 1528-45-1815.000
Owner: Whitenton Builders Phone: 919 427 8465 Email: Todd@whitenton-builders.com
Description of Proposed Work: Single Family Dwelling Total Job Cost: _____

GENERAL CONTRACTOR INFORMATION

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

General Contractor's Company Name: Whitenton Builders Enterprise Inc
Address: 843 Neighbors Rd Dunc NC
License #: 48607

Phone: 919 427 8465
Email: Todd@whitenton-builders.com

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: SFD
Electrical Contractor's Company Name: Electric Company
Address: 34 Forest Drive Mayes NC 27581
License #: 134492 909 S Main St
Faraway Varina NC 27526

Service Size: _____ Amps T-Pole: YES NO
Phone: 984 364 0109
Email: _____

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: SFD
Mechanical Contractor's Company Name: Beasly's Hvac
Address: 57 W Beasly Lane Coats NC
License #: 9497

Phone: 919 854 4248
Email: _____

PLUMBING CONTRACTOR INFORMATION

Description of Work: SFD
Plumbing Contractor's Company Name: Evan Hargrave
Address: 2409 Juniper Church Rutherford Oaks NC
License #: 36339

of Fixtures: 919 820 2613
Phone: _____
Email: _____

INSULATION CONTRACTOR INFORMATION

Insulation Contractor's Company Name: Tricity Insulation
Address: 3154 Beek Circle Raleigh NC

Phone: 919 698 0636



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.

A handwritten signature in black ink, appearing to read "Todd Whittle".

Signature of Owner/Contractor/Officer of Corporation

10-29-25

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.

A handwritten signature in black ink, appearing to read "Todd Whittle".

Signature of Owner/Contractor/Officer of Corporation

10-29-25

Date