



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: Wellons Realty Inc Date 2/21/2025Site Address: 163 MAPLE DRIVE, ERWIN Phone 910-892-3123Subdivision: FOREST HILLS Lot 3Description of Proposed Work: New SFD Total Job Cost 310,000**General Contractor Information**

Robert Paul Wellons

910-892-3123

Building Contractor's Company Name

Telephone

PO Box 730

ttart@wellonsrealty.com

Address

Email Address

7746

HEATED SQ FT 1576

GARAGE SQ FT 486

License #

Electrical Contractor InformationDescription of Work New SFD Service Size: 200 Amps T-Pole: ☒ Yes ☐ No

Jason H Pope Electrical Contractors

919-820-0837

Electrical Contractor's Company Name

Telephone

81 Beaver Creek Dr. Dunn, NC 28334

jhpelectrical@hotmail.com

Address

Email Address

27284-U

License #

Mechanical/HVAC Contractor InformationDescription of Work New SFD

J& M HEATING & AIR

910-897-5501

Mechanical Contractor's Company Name

Telephone

724 Turlington Rd. Dunn, NC 28334

jandmhvac@earthlink.net

Address

Email Address

L.17164

License #

Plumbing Contractor InformationDescription of Work New SFD# Baths 2

MLS Plumbing Co. Inc

910-309-4392

Plumbing Contractor's Company Name

Telephone

784 GENTRY RD, ERWIN, NC

mlsplumbing@hotmail.com

Address

Email Address

L.28833

License #

Insulation Contractor Information

Parker Bros Inc PO Box 1045 Clinton NC 28329

910-564-4132

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.

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

2/21/2025
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: Timothy Tart Estimating Mgr Date: 2/21/2025