



strong roots • new growth

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

## RESIDENTIAL BUILDING APPLICATION

Site Address: 35 Teri Vic Ct PIN: 2006021965  
Owner: William Clark Phone: 919-740-3626 Email: whclark2001@gmail.com  
Description of Proposed Work: New construction SFH Total Job Cost: 250,000

### GENERAL CONTRACTOR INFORMATION

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

William H Clark III 919-819-0297  
General Contractor's Company Name Phone  
5029 Allenbrooke Ln Fray- Treclark LLC@gmail.com  
Address 27526 Email  
88237  
License #

### ELECTRICAL CONTRACTOR INFORMATION

Description of Work: New Service and house Service Size: 200 Amps T-Pole: YES ☒ NO ☐  
~~Ray Tech Industries~~ EVC Sand and Video LLC 919-422-3519  
Electrical Contractor's Company Name Phone  
963 Summerlows Cross rd ~~Acclimated Service@gmail.com~~  
Address Kearneysville NC Email Samdiaz@gmail.com  
License #

### MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: New Home 2 Split Systems  
Superior Heating and Cooling 910 890 2812  
Mechanical Contractor's Company Name Phone  
900 Tyler Power lane FV Jmillersheatingandcooling@gmail.com  
Address 27526 Email  
33958  
License #

### PLUMBING CONTRACTOR INFORMATION

Description of Work: New house 3 bath # of Fixtures: 11  
Plumbing Principals 919 352 5101  
Plumbing Contractor's Company Name Phone  
318 Charlotte Ave Sanford NC plumbing Principals@gmail.com  
Address PI 37686 Email  
License #

### INSULATION CONTRACTOR INFORMATION

Friendship Insulation 919 291 2438  
Insulation Contractor's Company Name Phone

APPLICATION CONTINUES ON BACK



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.

W/llm H Cllk III  
Signature of Owner/Contractor/Officer of Corporation

7/15/2025  
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

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.

W/llm H Cllk III  
Signature of Owner/Contractor/Officer of Corporation

7-15-2025  
Date