



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: Chesapeake Homes Date 4/22/25
Site Address: 116 BARN DOOR DR Phone 410-212-4060
Subdivision: The Farm at Neil's Creek Lot 135
Description of Proposed Work: New construction single family Total Job Cost 250,000

General Contractor Information

Chesapeake Homes 410-212-4060
Building Contractor's Company Name Telephone
3100 SmokeTree Ct. suite 210 bblough@chesahomes.com
Address Email Address
63660 HEATED SQ FT 3024 GARAGE SQ FT 703
License #

Electrical Contractor Information

Description of Work single family new construction Service Size: 200 Amps T-Pole: ☒ Yes ☐ No
Romanoff Electric 919-848-4652
Electrical Contractor's Company Name Telephone
3006 Industrial Dr. ste-120 Raleigh, NC 27604 Jbolen@romanoffgroup.com
Address Email Address
4-12915
License #

Mechanical/HVAC Contractor Information

Description of Work single family new construction
Yellow Dot Heating & A/C Conditioning 919-925-4235
Mechanical Contractor's Company Name Telephone
2400 Summer Blvd suite 120 Raleigh, NC 27611 dherman@yellowdot.com
Address Email Address
32872
License #

Plumbing Contractor Information

Description of Work single family new construction # Baths 5
All-Max Plumbing 919-678-0111
Plumbing Contractor's Company Name Telephone
2428 Reliance Ave. Apex, NC 27539 umc@all-maxplumbing.com
Address Email Address
29022
License #

Insulation Contractor Information

Tri City Insulation 7204 Becky Ct Raleigh, NC 27613 919-514-1714
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.

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

4/22/25
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

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: BIB Date: 4/22/25