



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: 441 Black Duck Lane, Lillington PIN: 0527-51-1388.006

Owner: Caviness & Cates Building and Dev Co Phone: (910) 778-7902 Email: pam@cavinessandcates.com

Description of Proposed Work: new single family dwelling Total Job Cost: \$298,000.00

GENERAL CONTRACTOR INFORMATION

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

Caviness & Cates Building and Dev Co

General Contractor's Company Name
639 Executive Place, Ste 400 Fayetteville, NC 28305
Address
59586
License #

(910) 778-7902
Phone
pam@cavinessandcates.com
Email

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: new residential/new system Service Size: 200 Amps T-Pole: YES ☒ NO ☐

Parnell Electric
Electrical Contractor's Company Name
6400 Allie Cooper Road Godwin, NC 28344
Address
U.24236
License #

(910) 237-2751
Phone
parnellelectric@gmail.com
Email

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: new residential/new system

Carolina Comfort Air
Mechanical Contractor's Company Name
PO Box 699 Dunn, NC
Address
29077
License #

(910) 339-2374
Phone
rebecca@carolinacomfortair.com
Email

PLUMBING CONTRACTOR INFORMATION

Description of Work: new residential/new system # of Fixtures: _____

Titan's Plumbing LLC
Plumbing Contractor's Company Name
36 Sunnyfield Ct Benson, NC 27504
Address
34800
License #

(919) 615-1947
Phone
danielamedina@titansplumbing.com
Email

INSULATION CONTRACTOR INFORMATION

Cumberland Insulation
Insulation Contractor's Company Name

(910) 484-7118
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.

Pamela M. Geddie for Caviness & Cates
Signature of Owner/Contractor/Officer of Corporation

09.29.2025
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.

Pamela M. Geddie for Caviness & Cates
Signature of Owner/Contractor/Officer of Corporation

09.29.2025
Date