

RESIDENTIAL BUILDING APPLICATION

Site Address: 465 Black Duck Lane PIN: 0527-S1-1538.000
Owner: Cates Building Inc Phone: (910) 778-7902 Email: pam@cavinessandcates.com
Description of Proposed Work: new single family dwelling Total Job Cost: \$195,000

GENERAL CONTRACTOR INFORMATION

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

Cates Building Inc
General Contractor's Company Name (910) 778-7902
639 Executive Place, Ste 400 Fayetteville, NC 28305 Phone
Address pam@cavinessandcates.com
38851 Email
License # _____

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 (910) 237-2751
6400 Allie Cooper Road Godwin, NC 28344 Phone
Address parnellelectric@gmail.com
U.24236 Email
License # _____

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: new residential/new system
Carolina Comfort Air
Mechanical Contractor's Company Name (910) 339-2374
PO Box 699 Dunn, NC Phone
Address rebecca@carolinacomfortair.com
29077 Email
License # _____

PLUMBING CONTRACTOR INFORMATION

Description of Work: new residential/new system # of Fixtures: 15
Titan's Plumbing LLC
Plumbing Contractor's Company Name (919) 615-1947
36 Sunnyfield Ct Benson, NC 27504 Phone
Address danielamedina@titansplumbing.com
34800 Email
License # _____

INSULATION CONTRACTOR INFORMATION

Cumberland Insulation
Insulation Contractor's Company Name (910) 484-7118
Phone

Harnett
COUNTY

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 Geddis for Cates Building Inc
Signature of Owner/Contractor/Officer of Corporation

7/29/25
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.

Pamela M Geddis for Cates Building Inc
Signature of Owner/Contractor/Officer of Corporation

7/29/25
Date