



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: 402 Black Duck Lane, Lillington PIN: 0527-51-6308.006

Owner: Cates Building Inc Phone: (910) 778-7902 Email: pam@cavinessandcates.com

Description of Proposed Work: new single family dwelling Total Job Cost: \$232,000.⁰⁰

GENERAL CONTRACTOR INFORMATION

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

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

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: <u>new residential/new system</u>	Service Size: <u>200</u> Amps	T-Pole: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Parnell Electric	(910) 237-2751	
Electrical Contractor's Company Name	Phone	
6400 Allie Cooper Road Godwin, NC 28344	parnellelectric@gmail.com	
Address	Email	
U.24236		
License #		

MECHANICAL/HVAC CONTRACTOR INFORMATION

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

PLUMBING CONTRACTOR INFORMATION

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

INSULATION CONTRACTOR INFORMATION

Cumberland Insulation	(910) 484-7118
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.

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

6.9.2025
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. Jeddie for Cates Building Inc
Signature of Owner/Contractor/Officer of Corporation

6.9.2025
Date