

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: 117 Collins Road, Lillington, NC 27546		PIN: <u>0631-30-a6a</u>	PIN: <u>0631-30-2626</u> .000	
Owner: Milton Built Homes, LLC	Phone: <u>910 - 890</u>	2-0555 Email:andrew@mittonent	enprisesinc.com	
Description of Proposed Work: New	5FD	Total Job Co	st: <u>#321,<i>00</i>0</u>	
* NATIONAL ROSE CONTINUOUS DE		CTOR INFORMATION		
	ised contractor. Address, com	pany name & phone must match information on lic	ense.	
Millon Built Homes, LLC General Contractor's Company Name		<u>910.890.0555</u> Phone		
P.O. Box 451, Lillington, NC 27546			andrew@miltonenterprisesinc.com	
Address		Email		
87180 License #				
License #	ELECTRICAL CONTR	ACTOR INFORMATION		
	ELECTRICAL CONTR	ACTOR INFORMATION		
Description of Work: New SFD		Service Size: <u>a00</u> Amps	T-Pole: YES ☑ NO □	
Patrick Electrical Contractors, LLC Electrical Contractor's Company Name		910.893.5774		
• •		Phone		
1309 N. Main Street, Lillington, N. Address	C a /546	<u>tommypatrick910@gmail.</u> Email	<u> </u>	
04910				
License #				
<u>ME</u>	CHANICAL/HVAC CON	NTRACTOR INFORMATION		
Description of Work: New SFD				
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3+M Heating and Air Conditionin Mechanical Contractor's Company Name	<u>s</u>	910.897.5501 Phone		
724 Turlinaton Road, Dunn, NC 28				
Address		Email	,	
<u>17164</u> License #	•			
Electrice #	DI LIMBING CONTRA	ACTOR INFORMATION		
	I LOWIDING CONTICE	TOTOR IN ORMATION		
Description of Work: <u>New SFD</u>		#	of Fixtures: 7	
Wanner Plumbing Plumbing Contractor's Company Name	·	910.890.2299		
		Phone		
6812 us 421 N. Lillington, NC 27 Address	546	Email		
L.31576	• '			
License #	, '			
	INSULATION CONTR	ACTOR INFORMATION		
Friends Tossilation 2001 Riount Corols	Est Clauton AV 27521	0 919.291.2438		
Friends Traubition 2001 Blount Crack I		Phone		

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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.				
Andhew W. Mutter Signature of Owner/Contractor/Officer of Corporation O7/21/2025 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.				
Ander W. Mutte, Project Manager 07/a1/2025 Signature of Owner/Contractor/Officer of Corporation Date				