

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

RESIDENTIAL BUILDING	APPLICATION
Site Address: 67 Powell Farm Rd	DIN: 0527-02-3435,000
Owner: Double F LLC Phone: 919 906 4	4069 Email: Southerneonevete Quands Tre
Description of Proposed Work: Sitz built House	Total Job Cost: 190,000,00 Ne
* Must be owner or licensed contractor. Address, company na	
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General Contractor's Company Name	Phone
Audress	Southern concrete @ windstream. Net Email
5945-2 License #	
ELECTRICAL CONTRACTO	RINFORMATION
Description of Work: New House	_ Service Size: 200 Amps T-Pole: YES X NO □
Wester + Pace	9/9 499 3946 Phone
H65 Les/ie Rd San Ford NC 27330 Address	Email
12007 - U License #	
MECHANICAL/HVAC CONTRAC	CTOR INFORMATION
11. 1 laure	
Description of Work: New House	010 1100 1201
Affordable Heating + 14in Mechanical Contractor's Company Name	9/9 498 279/ Phone
PO 326 Lemon Springs NG 28355	
Address 20046	Email
License #	
PLUMBING CONTRACTOR	RINFORMATION
Description of Work: New House	# of Fixtures: <u>/2</u>
Dachte J Pline hing	910 814 7705
Plumbing Contractor's Company Name	Phone
614 Byrd Rd. Bunnlevel M 28323	Email
21649	
License #	D INFORMATION
INSULATION CONTRACTO	
Insulation Contractor's Company Name	919 661 0999 Phone
insulation contractors company reams	



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.

9-8-25 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.
60 eve Thomas 9-8-25
Signature of Owner/Contractor/Officer of Corporation Date