



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: 421 Needmore Rd. Cameron PIN: 9545-19-2882.00
Owner: Elite Providence NC LLC Phone: _____ Email: _____
Description of Proposed Work: Building of new home Total Job Cost: \$190,000

GENERAL CONTRACTOR INFORMATION

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

New Castle Contractors, LLC 910-978-9797
General Contractor's Company Name Phone
249 New Castle Ln. Spring Lake, NC newcastlecontractorsnc@gmail.com
Address Email
816904
License #

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Electrical new install Service Size: 200 Amps T-Pole: YES ☒ NO ☐
Pigtail Electric LLC 910-915-2695
Electrical Contractor's Company Name Phone
370 Slapout Rd. Mount Olive, NC pigtail11c@gmail.com
Address Email
3161616
License #

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: Mechanical new install
Certified Heating and air Conditioning 910-858-0000
Mechanical Contractor's Company Name Phone
P.O. Box 1071 Hope Mills, NC 28348 certifiedheatingandair11c@gmail.com
Address Email
20012
License #

PLUMBING CONTRACTOR INFORMATION

Description of Work: Plumbing New Install # of Fixtures: 3
Titan's Plumbing LLC 919-615-1947
Plumbing Contractor's Company Name Phone
P.O. Box 1045 Dunn, NC 28334 rodiomencia@titansplumbing.com
Address Email
34800
License #

INSULATION CONTRACTOR INFORMATION

Cumberland Insulation Co. 910-484-7118
Insulation Contractor's Company Name Phone
4205 Clinton Rd. Fayetteville, NC 28312

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.

Jan C. Holt
Signature of Owner/Contractor/Officer of Corporation

Sept 22, 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.

Jan C. Holt (Member/Manager)
Signature of Owner/Contractor/Officer of Corporation

Sept 22, 2025
Date