



Application # \_\_\_\_\_

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

Harnett County Central Permitting  
420 McKinney Pkwy Lillington, NC 27546  
PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Patrick Brown Date 11/3/25  
Site Address: 3232 Leaflet Church Rd Phone 919-665-8016  
Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work: Site built SFD Total Job Cost. 292,000

General Contractor Information

Building Contractor's Company Name: Value Build Homes Fayetteville LLC  
Address: 3015 Jefferson Davis Hwy, Sanford, NC  
License #: 10111 HEATED SQ FT 2679 GARAGE SQ FT 471  
Telephone: 919.777.0393  
Email Address: tanin@valuebuildhomes.com

Electrical Contractor Information

Description of Work electrical all for new SFD Service Size: 200 Amps T-Pole: ✓ Yes No  
Wester's Pace  
Telephone: 919.499.5389

Electrical Contractor's Company Name: 164 Leslie Rd, Sanford, NC 27332  
Address: 12007  
License #: 12007  
Email Address: william.wester@gmail.com

Mechanical/HVAC Contractor Information

Description of Work All mechanical work for new SFD  
Mechanical Contractor's Company Name: Certified Heating & Air  
Address: 207 W. David Parnell St, Parkton, NC  
License #: 20012  
Telephone: 910.858.0000  
Email Address: ehrin.certified@gmail.com

Plumbing Contractor Information

Description of Work All plumbing for new SFD  
Plumbing Contractor's Company Name: Bain Plumbing  
Address: 401 Kendall Mill Rd, Thomasville, NC  
License #: 20809  
Telephone: 336.476.0713  
Email Address: tbainplumbing@gmail.com

Insulation Contractor Information

Insulation Contractor's Company Name & Address: In City Insulations  
Telephone: 910.496.8855

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as 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 any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule

Signature of Owner/Contractor/Officer(s) of Corporation

11/3/25

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

Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Sign w/Title: Start coordinator Date: 11/3/25