



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: 10 Henshel Ln Broadway NC 27505 PIN: 0611-57-0445-000
Owner: Bradley & Elsa Stevens Phone: 910-494-4106 Email: elsa.stevens12@gmail.com
Description of Proposed Work: Build 1509 sq ft home on a crawl-space foundation Total Job Cost: \$ 200,000.00

GENERAL CONTRACTOR INFORMATION

(OWNER)

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

ELSA STEVENS
General Contractor's Company Name
10 HENSHEL LN. BROADWAY,
Address NC 27505
License #

(910) 494-4106
Phone
elsa.stevens12@gmail.com
Email

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: INSTALL ELECTRICITY
PIGTAIL LLC.
Electrical Contractor's Company Name
370 SLAPOUT Rd
Address MOUNT OLIVE, NC
28365
License #

Service Size: 200 Amps T-Pole: YES ☒ NO ☐
(919) 915-2695
Phone
PIGTAIL LLC @
Email gmail.com

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: INSTALL HVAC SYSTEM
CAROLINA Comfort Air, INC
Mechanical Contractor's Company Name
5212 US Hwy 70 Bus. WEST
Address 29077
License #

(919) 550-2492
Phone
Email

PLUMBING CONTRACTOR INFORMATION

Description of Work: BOC Plumbing LLC
Plumbing Contractor's Company Name
101 Holmes St. Dunn NC 28334
Address 37101
License #

of Fixtures: 10
910-514-2676
Phone
BOCplumbingllc@gmail.com
Email

INSULATION CONTRACTOR INFORMATION

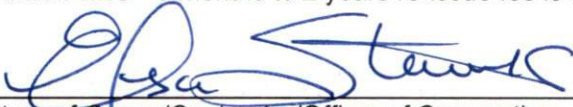
CUMBELLAD INSULATION Co.
Insulation Contractor's Company Name
4205 CLINTON Rd. FAYETTEVILLE, NC
License 901046 28312

(910) 484-7118
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.



Signature of Owner/Contractor/Officer of Corporation

16 OCT 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:

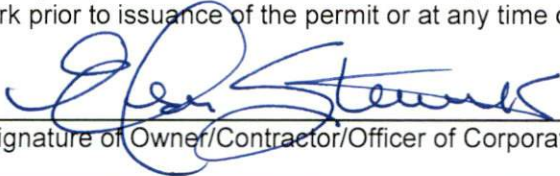
_____ Has 3 or more employees and has obtained workers' compensation insurance to cover them,

_____ 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.



Signature of Owner/Contractor/Officer of Corporation

16 OCT 2025

Date