

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # _____
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

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Greenfield Communities Date: 10/14/24
Site Address: Serenity Walk Parkway Phone: 919-369-1662
Directions to job site from Lillington: 401 North. Left on Piney Grove rawls Rd.,
Left on Serenity Walk Parkway., Property on right 1/3 mile down.

Subdivision: Serenity Lot: _____

Description of Proposed Work: Ground Sign

Heated SF _____ Unheated SF _____
General Contractor Information: Building Cost \$ 9500.00

Seneca Landscapes Inc. 919-369-1662

Building Contractor's Company Name Seneca Landscapes Inc. Telephone 919-369-1662

310 Bert Winston Rd. Youngsville NC 27596 Email Address andrew@senecalandscapes.com

Address 310 Bert Winston Rd. Youngsville NC 27596 Email Address andrew@senecalandscapes.com

Andrew VanVlack License # _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Electrical Contractor Information: Electrical Cost \$ _____
Description of Work _____ Service Size: _____ Amps #T-Poles _____

Electrical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Mechanical Contractor Information: Mechanical Cost \$ _____
Description of Work _____ # Units _____

Mechanical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Plumbing Contractor Information: Plumbing Cost \$ _____
Description of Work _____ # Baths _____

Plumbing Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

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

