



*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
PO Box 65 Lillington, NC 27646
910-893-7626 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Concrete Pipe & Precast, LLC Date: 02/13/19

Site Address: 452 Webb Road, Dunn, NC 28334 Phone: 800-999-2278

Description of Proposed Work: Add another concrete batching facility for an existing building

General Contractor Information: Building Cost \$ 40,000

Kevin McArtan Concrete Construction Company 919-202-7914

Building Contractor's Company Name Telephone

503 West Blanche Street, Selma, NC 27576 Kemcartanconcrete@gmail.com

Address Email Address

Kevin McArtan _____

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

Electrical Contractor Information: Electrical Cost \$ 35,000

Description of Work: Power Feed for Batch Equip. Service Size: 250 Amps #T-Poles 0

All-Star Electrical of Raleigh, Inc. 919-779-4743

Electrical Contractor's Company Name Telephone

PO Box 1176, Garner, NC 27529 allstarelec@gmail.com

Address Email Address

_____ 12880-U

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 \$ 4,600

Description of Work: Add Water Line for New Mixer # Baths 0

Creswell Plumbing 910-644-8505

Plumbing Contractor's Company Name Telephone

11770 NC Hwy South, Newton Grove, NC 28386 creswellplumbing@yahoo.com

Address Email Address

_____ 33354

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

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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 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 charged at full price per current fee schedule.

Signature of Owner/Contractor/Officer(s) of Corporation _____ Date 2/14/19

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: [Signature] CHIEF OPER. OFFICER Date: 2/14/19