



\*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 # BCFM2104.0004

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

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

**COMMERCIAL**

**Application for Building and Trades Permit**

Owner's Name: Natural Stone Design Date: 3/26/2021  
Site Address: 148 Jasco LN Phone: 919-896-9524  
Description of Proposed Work: New 21,600 sqft Warehouse

**General Contractor Information:** Building Cost \$ 2,144,976  
Triangle Home Pros LLC Telephone 919-346-1528  
Building Contractor's Company Name  
6312 Laureca Ln, Fuquay Varina NC 27526 Email Address THPHomes@gmail.com  
Address 77019

Signature of Owner/Contractor/Officer(s) of Corporation  
**Electrical Contractor Information:** Electrical Cost \$ 80,000 License #  
Description of Work Wife New Warehouse Service Size: 600 Amps #T-Poles Yes  
NEC Power Telephone 919-608-3826  
Electrical Contractor's Company Name  
117 Wild Blossom Dr, Apex NC Email Address M.Niclaus@NEPower.com  
Address 28370U

Signature of Owner/Contractor/Officer(s) of Corporation  
**Mechanical Contractor Information:** Mechanical Cost \$ 54,000 License #  
Description of Work New HVAC & Mechanical # Units 2 Heat Pump 3 Gas Heaters  
Superior Heating & Cooling LLC Telephone 910-890-2812  
Mechanical Contractor's Company Name  
9314 NC 42 Hwy, Holly Springs NC Email Address J.MillersHeatingandCooling@gmail.com  
Address 27540 33958

Signature of Owner/Contractor/Officer(s) of Corporation  
**Plumbing Contractor Information:** Plumbing Cost \$ 50,000 License #  
Description of Work Plumb New Warehouse # Baths 5  
All-Max Plumbing Telephone 919-678-0111  
Plumbing Contractor's Company Name  
2428 Reliance Ave, Apex NC 27539 Email Address Vicky@All-MaxPlumbing.com  
Address 29022

Signature of Owner/Contractor/Officer(s) of Corporation  
**Insulation Contractor Information** License #  
RCA Construction Telephone 919-914-3986  
Insulation Contractor's Company Name & Address 324 Huckleberry Ln  
Mebane, NC  
27302

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

<u>Sprinkler Contractor Information</u>	
<u>J&amp;D Sprinkler</u>	<u>919-553-2356</u>
Sprinkler Contractor's Company Name	Telephone
<u>315 Main St, Clayton, NC, 27520</u>	<u>RLazar@JDSprinkler.com</u>
Address	Email Address
_____	<u>16269</u>
Signature of Officer(s) of Corporation	License #
<u>Fire Alarm Contractor Information</u>	
<u>J&amp;D Sprinkler, see Above</u>	_____
Fire Alarm Contractor's Company Name	Telephone
_____	_____
Address	Email Address
_____	_____
Signature of Officer(s) of Corporation	License #
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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

3/26/2021  
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: \_\_\_\_\_ Date: \_\_\_\_\_