



\*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  
[Signature] License # 77019

**Electrical Contractor Information:** Electrical Cost \$ 180,000  
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  
[Signature] License # 28370U

**Mechanical Contractor Information:** Mechanical Cost \$ 54,000  
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 License # 33958

**Plumbing Contractor Information:** Plumbing Cost \$ 50,000  
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 License # 29022

**Insulation Contractor Information**  
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

JPC



**Sprinkler Contractor Information**

J&D Sprinkler  
Sprinkler Contractor's Company Name

315 Main St, Clayton, NC, 27520  
Address

Signature of Officer(s) of Corporation

919-553-2356  
Telephone

RL92ar@JDSprinkler.com  
Email Address

16269  
License #

**Fire Alarm Contractor Information**

J&D Sprinkler, See Above  
Fire Alarm Contractor's Company Name

Address

Signature of Officer(s) of Corporation

Telephone

Email Address

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]  
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.

[Signature]  
Sign w/Title:

Date: 6/3/2022