



Jetport - GC

*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 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: HARNETT COUNTY REGIONAL JETPORT Date: 1/11/23
Site Address: 615 Airport Road, Erwin NC Phone: 910-814-2740
Description of Proposed Work: Construction of New Terminal Building

General Contractor Information: Building Cost \$ 4,962,449.35

Jackson Builders Inc. 919-734-5428
Building Contractor's Company Name Telephone
1608 West Grantham Street dhope@jacksonbuilders.com
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information: Electrical Cost \$ 830,435

Description of Work New Construction/Remodel Service Size: 800 Amps #T-Poles 1
Kennedy Electrical Service, LLC 910-375-0122
Electrical Contractor's Company Name Telephone
800 N Church Street/PO Box 887, Mount Olive, NC 28365 kennedyelectricalservice@yahoo.co
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical Contractor Information: Mechanical Cost \$

Description of Work New Mechanical Systems # Units 11/ One Ductless Split
Costa and Company, Inc 252-977-3020
Mechanical Contractor's Company Name Telephone
720 Parter Road, Rocky Mount NC jeromejr@costacompanyinc.com
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information: Plumbing Cost \$

Description of Work New Plumbing Work # Baths 5
Advance Plumbing of Lagrange 1-252-566-3011
Plumbing Contractor's Company Name Telephone
PO Box 193 Lagrange NC 28551 dannytrout2015@gmail.com
Address Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Southeastern Interiors 910-893-8486
Insulation Contractor's Company Name & Address Telephone

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

Sprinkler Contractor Information

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

Fire Alarm Contractor Information

Kennedy Electrical Service, LLC _____
 Fire Alarm Contractor's Company Name _____ Telephone 910-375-0122
 800 N Church St/PO Box 887, Mount Olive, NC 28365 _____
 Address _____ Email Address kennedyelectricalservice@yahoo.com
 Signature of Officer(s) of Corporation _____ License # 29797-U

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] _____ 1/11/23
 Signature of Owner/Contractor/Officer(s) of Corporation 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: *[Signature]* _____ Date: 1/11/23



Jet Port - Plumbing

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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: Harnett County Regional Jetport Date: 1-11-25
Site Address: 615 Airport Road, Erwin NC. Phone: 910-814-2740
Description of Proposed Work: _____

General Contractor Information: Building Cost \$ _____

Jackson Builders Inc 019-734-5428
Building Contractor's Company Name Telephone

Address _____ Email Address _____

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 5

Advance Plumbing of Lorange 252-566-3011
Plumbing Contractor's Company Name Telephone

PoBox 193 Lorange NC 28551 Danny Trout 2015@gmail.com
Address Email Address

[Signature] 33357
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**



Jet Port - Mechanical

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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: Harnett County Regional Jetport Date: 1-11-23
Site Address: 415 Airport Road, Edwin NC Phone: 910-814-2740
Description of Proposed Work: New Terminal Bld

General Contractor Information: Building Cost \$

JACKSON BUILDERS INC. 919-734-5428
Building Contractor's Company Name Telephone

Address Email Address

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 \$ 239,900.00

Description of Work Install new HVAC consisting of 10 ducted split heat # Units 11
pumps and 1 ductless split 252-977-3020

Mechanical Contractor's Company Name Telephone

Costa and Company, Inc. 720 Porter Rd., RMT, NC jeromejr@costacompanyinc.com

Address 27803 Email Address 12337

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

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1838894

Filed on: 01/13/2023

Initially filed by: bhowell

Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com <http://www.liensnc.com>

Address: 223 S. West Street, Suite 900 /
Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com liensnc@liensnc.com

Project Property

Terminal Building
615 Airport Road
Erwin, NC 28339
Harnett County

Property Type

Other

Print & Post



Contractors:

Please post this notice on the Job Site.

Suppliers and Subcontractors:

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

Owner Information

Harnett County
615 Airport Road
Erwin, NC 28339
United States
Email: npusser@harnett.org
Phone: 910-890-0067

Date of First Furnishing

01/16/2023

View Comments (0)

Technical Support Hotline: (888) 690-7384