

\*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: Free Beer, LLC (Steven Khoo)	Date: 12/13/2022			
	Phone: 301-922-5689			
Description of Proposed Work: Upfit of existing space to Static Line Brewing Co.				
General Contractor Information: Building Cost \$ 264,827.00				
RAYWEST DESIGNBUILD 910-302-8990				
Building Contractor's Company Name	Telephone			
2818 Raeford Rd., Suite 300, Fayetteville, NC 28303	tara.ostrander@raywestdesignbui			
Address	Email Address			
Tara Ostrander  Digitally signed by Tara Ostrander Date: 2022.12.16 14:54:00 -05'00'	76368			
Signature of Owner/Contractor/Officer(s) of Corporation  License #				
Electrical Contractor Information: Electrical Cost \$	117586.00			
Description of Work Service Size: Amps #T-Poles				
Rowe's Electric Company	910-835-4033			
Electrical Contractor's Company Name	Telephone			
1457 Hayes Road, Spring Lake, NC 28390	chris.roweelect@yahoo.com			
Address he stopher De our	Email Address			
Signature of Owner/Contractor/Officer(s) of Corporation	License #			
Mechanical Contractor Information: Mechanical Cost \$ 88,000.00				
Description of Work	# Units			
Cape Fear Air Conditioning, Heating, & Electrical Company	910-483-8790			
Mechanical Contractor's Company Name	Telephone			
1139 Robeson Street, Fayetteville, NC 28305 todd.mcamis@capefearair.co				
Address Email Address				
Todd McAmis	_3005×			
Signature of Owner/Contractor/Officer(s) of Corporation  License #  Plumbing Contractor Information: Plumbing Cost \$ 41,265.00				
Description of Work	# Baths			
McKenzie Plumbing	910-764-2200			
Plumbing Contractor's Company Name	Telephone			
414 Cedar Creek Rd., Fayetteville, NC 28312	projects@mckenzieplumbing.com			
Address Email Address				
₹ V \	13588			
Signature of Owner/Contractor/Officer(s) of Corporation	License #			
Insulation Contractor Information				
Scott's Painting & Drywall, Inc.	910-258-8793			
Insulation Contractor's Company Name & Address	Telephone			



Sprinkler Contractor Information				
Sprinkler Contractor's Company Name		Telephone		
Address		Email Addr	ress	
Signature of Officer(s) of Corporation  License #  Fire Alarm Contractor Information				
Fire Alarm Contractor's Company Name	<del></del>	Telephone		
Address	<u> </u>	Email Addr	ess	
Signature of Officer(s) of Corporation		License #		
<u>Driveway Access</u> - 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 <a href="mailto:any">any</a> 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.				
Date: 2022.	ned by Tara Ostrander .12.16 14:56:50 -05'00'	12/16/2022	2	
Signature of Owner/Contractor/Officer(s	,	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) employ	ees and no subcontract	ors.		
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: Tara Ostrander	Digitally signed by Tara Osto Date: 2022.12.16 14:54:41 -	ander 05'00'	<sub>te</sub> . 12/16/2022	