

*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

420 McKinney Pkwy Lillington, NC 27546

PO Box 65 Lillington, NC 27546

910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: T + L Coats, LLC Date: 1-11-2023

Site Address: 320 E. Stewart St., Coats, NC 27521 Phone: (910) 890-3256

Directions to job site from Lillington: take Hwy. 27 to Coats, cross Hwy. 55 towards Benson ... site will be on the right. Enter next to University Storage at 310 N. Orange St., Coats, NC

Subdivision: ~~UPFIT CONSTRUCTION FOR UNIT 320 E. STEWART ST.~~

Description of Proposed Work: UPFIT construction for unit 320 E. Stewart St.

Heated SF 1750 Unheated SF _____

General Contractor Information: Building Cost \$ 11,115

Barefoot Building Company, L.L.C.
Building Contractor's Company Name

(910) 890-3256
Telephone

P.O. Box 1411, Coats, NC 27521
Address

urbarefoot@yahoo.com
Email Address

WLRAL
Signature of Owner/Contractor/Officer(s) of Corporation

81021
License #

Electrical Contractor Information: Electrical Cost \$ 9,796

Description of Work installation of electrical system Service Size: 200 Amps #T-Poles _____

Reliant Electric and Power
Electrical Contractor's Company Name

(919) 632-6963
Telephone

222 Normandy Drive, Clayton, NC
Address

Email Address

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

295884
License #

Mechanical Contractor Information: Mechanical Cost \$ 12,632

Description of Work installation of HVAC system # Units 1

Fayetteville Heating and Air Contractors Inc.
Mechanical Contractor's Company Name

(910) 484-2273
Telephone

6458 Sungi Ln., Fayetteville, NC
Address

Email Address

Kerry Pankel
Signature of Owner/Contractor/Officer(s) of Corporation

18408
License #

Plumbing Contractor Information: Plumbing Cost \$ 4,335

Description of Work installation of plumbing system # Baths _____

Fred Andrew Chris Leaper, III
Plumbing Contractor's Company Name

(919) 676-1925
Telephone

115 Keyman Drive, Coats, NC
Address

Email Address

Paul A. Chris Leaper
Signature of Owner/Contractor/Officer(s) of Corporation

L. 30173
License #

Insulation Contractor Information

* Installed by erector
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	<u>1-11-2023</u> Date
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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.

Company or Name: Barnhart Building Company, LLC

Sign w/Title:  , Member/Manager Date: 1/11/2023



Initial Application Date: _____

Application # _____

DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 420 McKinney Pkwy, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 1 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: T & L Coats, LLC Mailing Address: 165 Sommersville Park Rd.

City: Raleigh State: NC Zip: 27603 Contact # (910) 890-3256 Email: wrbarefoot@yahoo.com

APPLICANT*: - same - Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact # _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Robert Barefoot Phone # (910) 890-3256

Address: 302 E. Stewart St., Coats, NC PIN: 0690-95-3453.000

Zoning: _____ Watershed: _____ Flood: _____ Deed Book Page: 1

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____

Business Sq. Ft. Retail Space: 1750 Type: Office/Retail # Employees: _____ Hours of Operation: _____

Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____

Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____

Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____

Accessory/Additional/Other (Size _____ x _____) Use: _____

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Comments: _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

[Signature]
Signature of Owner or Owner's Agent

1-11-23
Date

****This application expires 6 months from the initial date if permits have not been issued****

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

*****It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.*****

*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 # _____

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420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.hamett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: J+L Coats, LLC Date: 1-11-2023

Site Address: 302 E. Stewart St., Coats, NC 27521 Phone: (910) 890-3256

Directions to job site from Lillington: take Hwy. 27 to Coats, cross Hwy. 55 towards Benson ... site will be on the right. Enter next to University Storage at 310 N. Orange St., Coats, NC.

Subdivision: N/A Lot: _____

Description of Proposed Work: upfit construction for unit 302 E. Stewart St.

Heated SF 1750 sf. Unheated SF _____

General Contractor Information: Building Cost \$ 11,115

Barefoot Building Company, L.L.C.

(910) 890-3256

Building Contractor's Company Name

Telephone

P.O. Box 1411, Coats, NC 27521

wrbarefoot@yahoo.com

Address

Email Address

[Signature]

81627

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

License #

Electrical Contractor Information: Electrical Cost \$ 9,796

Description of Work installation of electrical system Service Size: 200 Amps #T-Poles _____

Reliant Electric and Power

(919) 632-6963

Electrical Contractor's Company Name

Telephone

222 Normanly Drive, Clayton, NC

Email Address

Address

[Signature]

295884

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

License #

Mechanical Contractor Information: Mechanical Cost \$ 12,632

Description of Work installation of HVAC system # Units 1

Fayetteville Heating & Air Contractors Inc.

(910) 484-2273

Mechanical Contractor's Company Name

Telephone

6458 Song Ln, Fayetteville, NC

Email Address

Address

[Signature]

18408

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

License #

Plumbing Contractor Information: Plumbing Cost \$ 4,335

Description of Work installation of plumbing system # Baths _____

Fred Arthur Chris Leary, LLC

(919) 676-1925

Plumbing Contractor's Company Name

Telephone

115 Keyman Drive, Coats, NC

Email Address

Address

[Signature]

L. 30173

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

License #

Insulation Contractor Information

* Installed by Erector
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
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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.

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	1-11-2023
Signature of Owner/Contractor/Officer(s) of Corporation	Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

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General Contractor Owner Officer/Agent of the Contractor or Owner

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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.

Company or Name: Bantoot Building Company, LLC

Sign w/Title:  , Member/Manager Date: 1/11/2023



Initial Application Date: _____

Application # _____

DRB # _____ CU # _____

COMMERCIAL
COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 420 McKinney Pkwy, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 1 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: T & L Coats, LLC Mailing Address: 165 Sommersville Park Rd.

City: Raleigh State: NC Zip: 27603 Contact # (910) 890-3256 Email: wrbarefoot@yahoo.com

APPLICANT*: - same - Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact # _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Robert Barefoot Phone # (910) 890-3256

Address: 320 E. Stewart St. PIN: 0690-95-3453.000

Zoning: _____ Watershed: _____ Flood: _____ Deed Book Page: 1

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

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Business Sq. Ft. Retail Space: 1750 Type: Office / Retail # Employees: _____ Hours of Operation: _____

Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____

Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____

Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____

Accessory/Addition/Other (Size _____ x _____) Use: _____

Water Supply: County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank _____ County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Comments: _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

[Signature]
Signature of Owner or Owner's Agent

1-11-23
Date

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RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.



TOWN OF COATS

ZONING PERMIT APPLICATION

NOTE: Attach a site plan that includes property lines (front, side, and rear), location of proposed structures (including driveways, decks, etc.), and existing structures. This plan should be drawn to scale. This permit along with plans shall be submitted to the Harnett County Building Inspections Department.

Permit No.: 6-23-22-1 Date: 6/23/22 Fee: \$500

Parcel ID*: 07069016980009 Area Zoned As: C-3

APPLICANT:

PROPERTY OWNER:

Name (Print) Robert Barefoot
 Address 3036 NC Hwy 27 East
 City, State Coats, NC
 Zip Code 27521
 Phone # (910) 890-3256

Name T & L Coats, LLC
 Address 165 Sommerville Park Rd.
 City, State Raleigh, NC
 Zip Code 27603
 Phone # (910) 890-3256

Location of Property: IN-TOWN ETJ ETJ (contiguous)

Present Use of Property: mini storage / vacant

PROPOSED USE OF PROPERTY:

- Single Family Dwelling: # Rooms: _____ # Bedrooms: _____ Square Feet: _____
- Multi Family Dwelling: # of Units: _____ #Bedrooms (per unit): _____ Square Feet (per unit) _____
- Mobile Home (single lot): Single wide: _____ Double Wide: _____
- Mobile Home Park: Section 16, Zoning Ordinance must apply
- Business: Total # of employees per day _____ Type of business Commercial retail center
- Others (specify): _____

Existing structure: Renovate: _____ Addition: _____ Demolish: _____

WATER AND SEWER SUPPLY:

Water: Private Public Proposed Existing
 Sewer: Private Public Proposed Existing

Applicant: I certify that all of the information presented in this application is true, complete, and accurate to the best of my knowledge. False information is grounds for rejection of the application.

Signature: [Signature], Member-Mayor Date: 6-23-2022

APPROVED

ZONING ADMINISTRATOR USE ONLY

Notes: Master Site Plan Approved 2019, Public Utilities already approved and installed.

Approved: Denied: DOT approval before C/O.

Zoning Administrator: [Signature] Date: 6/23/2022

TOWN OF COATS ZONING VALID FOR 12 MONTHS

THIS PERMIT IS VALID FOR 12 MONTHS

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1821962

Filed on: 12/07/2022

Initially filed by: WRBarefoot

Designated Lien Agent

Investors Title Insurance Company

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 (<mailto:support@liensnc.com>)

Project Property

302-320 East Stewart Street
Coats, NC 27521
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

T&L Coats, LLC
165 Sommerville Park Road
Raleigh, NC 27603
United States
Email: wrbarefoot@yahoo.com
Phone: 910-890-3256

Date of First Furnishing

12/07/2022

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384