\*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 Llllington, 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 Trad	
Owner's Name: FAIRWAY POINT, LLC	Date: <u>6/8/20</u> 23
Site Address: GAUERY DR. SPRING LAKE, NC	<b>28390</b> Phone: 9/6-580-2425
Directions to job site from Lillington: FOLLOW NC-27 To	NURSERY RD. TO RAY
PD CONTINUE TO ANDERSON CREEK DR.	•
TO GALLERY DR.	
Subdivision: ANDERSON CREEK COUNTRY CLUB	Lot: 9 BAY GARAGE
Description of Proposed Work: NEW CONSTRUCTION	- 9 BAY GARAGE
Heated SF 2353	
General Contractor Information: Building Cos	
HEH (ONSTRUCTORS, TNC Building Contractor's Company Name	910 - 580 - 2 4 2 5 Telephone
2919 BREEZEWOOD AVE, # 100	BRYANBENDIT @ HUFFFAMILY OFFICE, C
Aches	Fmail Address
Signature of Owner/Contractor/Officer(s) of Corporation	NC, 31554
Electrical Contractor Information: Electrical Contractor Information:	cost \$ 7.310
CURRENT TECHNOLOGIES ELECTRIC / LLC Electrical Contractor's Company Name  DALE	919 - 278 - 8894 Tolonbono
911 PAVERSTONE DEIVE, SUME C NC,2	GH Telephone
Address	Email Address
	23963U
Signature of Owner/Contractor/Officer(s) of Corporation <u>Mechanical Contractor Information:</u> Mechanic	License #
	# Units
NA	1 0 1110
Mechanical Contractor's Company Name	Telephone
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation .	License #
Plumbing Contractor Information: Plumbing Contractor Information:	
Description of Work	# Baths
Plumbing Contractor's Company Name	Telephone
Plumping-Contractor's Company Name	i diebtiotie
Address	Email Address
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Informati	<u>on</u>
NIA	Talashaua
Insulation Contractor's Company Name & Address	Telephone

Sprinkler Contractor Information	1	
Sprinkler Contractor's Company Name	Telephone	
Address	Email Address	
Signature of Officer(s) of Corporation  Fire Alarm Contractor Information	License #	
NA		
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 Ac	ccess/Permit?YesNo	
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.		
FOR HEH CONSTRUCTORS, IN Signature of Owner/Contractor/Officer(s) of Corporation	c. 6/8/2023 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' con	npensation 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 covering themselves.	of workers' compensation insurance	
Has no more than two (2) employees and no subcontractors.		
While working on the project for which this permit is sought it is underst Department issuing the permit may require certificates of coverage of w to issuance of the permit and at any time during the permitted work from carrying out the work.	rorker's compensation insurance prior n any person, firm or corporation	
Company or Name: H&H CONSTRUCTORS, INC		
Company or Name: H&H CONSTRUCTORS, TWC  Sign w/Titte: REGIONAL MGR	Date: <u>6/8/2023</u>	

. ,





## **Application for Plan Review**

Application #

Whiteagolf #		
Date Received:	Received By:	
Name of Project:	FAIRWAY POINT	
Physical Address of Project:	GALLERY DR 9-BAY GARAGE	
	SPRING LAKE, NC 28390	
Plans Submitted By:	BEYAN BENDIT	
Project Phone:	(910)-580-2425	
Contact Person/Address:	BRYAN BENDIT / HEH CONSTRUCTORS, INC.	
	2919 BREEZEWOOD AVE, # 100	
,	FAYETTEVILLE, NC 28303	
Contact Email:	BRY ANBENOIT @ HUFFFAMILY OFFICE. COM	
Contact Phone:	( <u>910</u> )-580-2425 ()	
Contractor's Name/Info:	H&H CONSTRUCTORS, INC.	
	2919 BREEZEWOOD AVE, # 100	
	FAYETTEVILLE, NC, 28303 - NC LICENSE 3155	
Contractor's Phone:	(910)-580-2425	

- Plans that are submitted will be reviewed as quickly as possible with an <u>average time of review</u> between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <a href="http://hteweb.harnett.org/Click2GovBP/Index.jsp">http://hteweb.harnett.org/Click2GovBP/Index.jsp</a> or by calling the Harnett County Central Permitting Office (910-893-7525, Option #2), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any
  required inspections can be conducted.



