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.: 8-16-23- Date: 8 16 23 Fee : \$50		
Parcel ID*: 07069616030604 Area Zoned As: GC - General Commercial 124 E. Stewart St.		
APPLICANT: PROPERTY OWNER:		
Name (Print) Larry Barr Sof-Gen. Cont. Peggy + Rilly Pope		
Address 2763 Johnston Co, Rd. Address PO BOX 848		
City, State Angich, N.C., City, State Conts, NC		
Zip Code Zip Code		
Phone # (919) 795 - 65 [] Phone #		
Location of Property: IN-TOWN ETJ ETJ (contiguous)		
Present Use of Property: Commercial Shopping Center		
PROPOSED USE OF PROPERTY:		
[] Single Family Dwelling: # Rooms: # Bedrooms: Square Feet:		
[] Business: Total # of employees per day Type of business [] 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: Date: 8-16-23		
ZONING ADMINISTRATOR USE ONLY Notes: interior renovation of commercial space		
Approved: [\sqrt{]} Denied: []		
Zoning Administrator: York Wal Date: 8-16-23		
THIS PERMIT IS VALID FOR 12 MONTHS APPROVED APPROVED		
Post Office Box 675 • Coats, North Carolina 27521 TOWN OF COATS ZONING TOWN OF COATS ZONING TOWN OF COATS ZONING		





www harnett org

Application for Plan Review

Аррі	ication #
Date Received: 8-16	23 Received By: Lanny Bake Poot
Name of Project:	Renovation - Drs. Office Coats N.(
Physical Address of Project:	124 East Stewart St.
	Coats NC 27501
Plans Submitted By:	Larry Barefoot Gen. Contractor
Project Phone:	(919)-795-6511
Contact Person/Address:	Larry Barrfoot
	2763 Johnston Co, Rd
	Angien, N.C. 2 x501
Contact Email:	Laury Barefoot 1951 @ G-Mail . Com
Contact Phone:	(919)-795-6511
Contractor's Name/Info:	Larry Baretost Contractor
	2763 Johnston Co. Rd.
	Angier, N.C. 27501
Contractor's Phone:	(919).795.6511 License# 25487

- 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 http://hteweb.harnett.org/Click2GovBP/Index.jsp 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.



*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 <u>COMMERCIAL</u>

Application for Building and Trades Permit Site Address: Description of Proposed Work: General Contractor Information: Building Cost \$ 25,000.00 Lanny Banefoot Gen, Contractor Building Contractor's Company Name 2763 Johnston Co. Rd Address 254 License # Signature of Owner/Contractor Officer(s) of Corporation Electrical Contractor Information: Electrical Cost \$ Service Size: 200 Description of Work KENOUATION Electrical Contractor's Company Name PBARIA EXTREME a Compil, com Address er/Contractor/Officer(s) of Corporation

Mechanical Contractor Information: Mechanical Cost \$ 320000 Signature of Owber/Contractor/Officer(s) of Corporation Description of Work DY AND TOTAL Mechanical Contractor's Company Name **Email Address** Address Signature of Owner/Contractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost \$ Plumbing Contractor's Company Name nail Address Address Signature of Owner/Contractor/Officer(s) of Corporation Insulation Contractor Information

Larry Barefat Gen. Cont.

Insulation Contractor's Company Name & Address 919-795-6511 Telephone 2763 Johnston Ca Rd. Angier, N.C. 27501 *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 #		
<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 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.			
Jany Darefort	9-26-23		
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:			
	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: Serry Bufool - owner	any person, firm of corporation		