

*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.

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: Jay Ambe Shatki LLC Date: 3-1-24
Site Address: 8920 HWY 401 North Fuquay-Varina, NC 27526 Phone: 910-988-6049
Directions to job site from Lillington: 401 north to Chalybeate Springs Rd. Job site on right corner.

Subdivision: N/A Lot: N/A

Description of Proposed Work: Gas Station / Convenience Store

Heated SF 4,800 Unheated SF 1,800

General Contractor Information: Building Cost \$ 1,250,000.00

Regency Homes Inc. dba Regency Construction 910-824-4006

Building Contractor's Company Name Telephone

PO Box 25640 Fayetteville, NC 28314 jasen@regencync.com

Address Email Address

Jay Ambe Shatki 32067 Unlimited

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

Electrical Contractor Information: Electrical Cost \$ 103,818.00

Description of Work Building Electrical Service Size: 1,200 Amps #T-Poles 1

Rowe Electric Corporation 910-835-4033

Electrical Contractor's Company Name Telephone

1457 Hayes Rd. Spring Lake, NC 28390 chris.roweelect@yahoo.com

Address Email Address

Chris Rowe - Rowe's Electric Corporation 07510-U

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

Mechanical Contractor Information: Mechanical Cost \$ 67,375.00

Description of Work Install 4 Pakage Units on Roof # Units 4

Mike's Heating, Air Cond, and Elec. 910-964-4454

Mechanical Contractor's Company Name Telephone

PO Box 48845 Cumberland, NC 28311 michaelmeaut@aol.com

Address Email Address

Mike Meaut - Mike's Heating, A/C and Electrical 23108, H3, H2, 1

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

Plumbing Contractor Information: Plumbing Cost \$ 74,525.00

Description of Work Building Plumbing # Baths 2

Trinity Plumbing 910-676-8426

Plumbing Contractor's Company Name Telephone

1989 Wilmington Hwy. Fayetteville, NC 28306 trinityestimate@gmail.com

Address Email Address

Tony Faircloth - Trinity Plumbing LLC 32324

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

Insulation Contractor Information

Tri-City Insulation and Building Products 910-486-8855

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.

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

3/11/24
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.

Company or Name: Regency Construction - Jasen Rintala - Project Manager

Sign w/Title: *J. Rintala* Date: 4-1-24