

\*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: Ample Storage Erwin LLC Date: 6/12/24  
Site Address: 404 E Jackson Blvd "Bldg A" Phone: 919-934-3041  
Directions to job site from Lillington: 421 E to Erwin. Jobsite on left  
before Lowe's

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Proposed Work: Construct new Climate controlled Storage Bldg.

Heated SF 17,500 Unheated SF \_\_\_\_\_

**General Contractor Information:** Building Cost \$ 700,000.00

Lyndale Inc  
Building Contractor's Company Name

919-934-3041  
Telephone

PO Box 608 Smithfield NC 27577  
Address

bradley@lampmanagement.com  
Email Address

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

11727  
License #

**Electrical Contractor Information:** Electrical Cost \$ 87,500.00  
Description of Work New Elect. Service Size: 600 Amps #T-Poles \_\_\_\_\_

Hinnant's Elect. Service  
Electrical Contractor's Company Name

919-201-2258  
Telephone

1791-201 Johnston Parkway Rd Kenly NC 27542  
Address

hinnantselectrical@gmail.com  
Email Address

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

22441 Unl.  
License #

**Mechanical Contractor Information:** Mechanical Cost \$ 65,450

Description of Work New HVAC  
Comfort Magic Inc  
Mechanical Contractor's Company Name

# Units 6  
919-634-9168  
Telephone

P.O. Box 247 Selma NC 27576  
Address

comfortmagichvac@gmail.com  
Email Address

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

29952  
License #

**Plumbing Contractor Information:** Plumbing Cost \$ \_\_\_\_\_

Description of Work N/A.

# Baths \_\_\_\_\_

Plumbing Contractor's Company Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

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

License # \_\_\_\_\_

**Insulation Contractor Information**

Lyndale Inc.  
Insulation Contractor's Company Name & Address

919-625-8751  
Telephone

\*NOTE: General Contractor must fill out and sign the second page of this application