

*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: 6/18/24

Site Address: 404 E. Jackson Blvd "Bldg E" Phone: _____

Directions to job site from Lillington: 421 E. to Erwin Jobsite on left before Lowe's.

Subdivision: _____ Lot: _____

Description of Proposed Work: Construct Non-climate self storage Bldg.

Heated SF _____ Unheated SF 5000
General Contractor Information: Building Cost \$ 996,000.00

Lymndde Inc. _____
Building Contractor's Company Name Telephone 919-934-3041

PO Box 608 Smithfield NC 27577 _____
Address Email Address brodley@lampmanagement.com

Brodley Paul _____
Signature of Owner/Contractor/Officer(s) of Corporation License # 11727

Electrical Contractor Information: Electrical Cost \$ 2500.00
Description of Work Install wall panel only Service Size: 20 Amps #T-Poles _____

Hinnant's Elect Service _____
Electrical Contractor's Company Name Telephone 919-201-2258

1291-201 Johnston Parkway Rd Only NC 27542 _____
Address Email Address hinnantselectrical@gmail.com

Everette Hinnant _____
Signature of Owner/Contractor/Officer(s) of Corporation License # 22441 Unl.

Mechanical Contractor Information: Mechanical Cost \$ _____
Description of Work N/A # Units _____

Mechanical Contractor's Company Name Telephone _____

Address Email Address _____

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

Insulation Contractor's Company Name & Address N/A Telephone _____

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