

*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: 421 Campbell University - Jeff Shropshire Date: 4/30/24
Site Address: 70 Harmon Rd, Lillington, NC 27546 (behind BMS building) Phone: 336-362-4422
Directions to job site from Lillington: Campbell University campus

Subdivision: _____ Lot: _____

Description of Proposed Work: Demo a portion of exterior wall, Install 2 HW non-condensing boilers with circular pumps, and new electrical sub panel
Heated SF _____ Unheated SF _____

General Contractor Information: Building Cost \$ 22,785.00

Brian Atkins Construction LLC 336-442-0944

Building Contractor's Company Name Telephone

50590 Fred Lineberry Rd, Randleman, NC 27317 brianatkinsconst@yahoo.com

Address Email Address

Brian Atkins 70767

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

Electrical Contractor Information: Electrical Cost \$ 16,000.00

Description of Work new 208V electrical sub panel Service Size: _____ Amps #T-Poles _____

Brady Services Inc 336-646-3567

Electrical Contractor's Company Name Telephone

2025 16th St, Greensboro, NC 27405 marvin.batten@bradyservices.com

Address Email Address

Marvin Batten 16761-U

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

Mechanical Contractor Information: Mechanical Cost \$ 98,000.00

Description of Work Install 2 HW non-condensing boilers # Units 2

Brady Trane Inc 336-402-8696

Mechanical Contractor's Company Name Telephone

2025 16th St, Greensboro, NC 27405 josh.roderick@bradyservices.com

Address Email Address

Josh Roderick 20378

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

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # 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 Telephone

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

