



strong roots • new growth

COMMERCIAL BUILDING APPLICATION

CentralPermitting@Harnett.org
(910) 893-7625 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

Site Address: 1585 Buffalo Lake Rd. Sanford, NC PIN: _____

Owner: Mavis Southeast, LLC Phone: (914) 984-2500 Email: RMcNeill@mavis.com

Description of Proposed Work: New Commercial construction tire Total Job Cost: \$ 1,800,000

GENERAL CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Berry Construction Co. Inc.
General Contractor's Company Name

423-2167-2234
Phone

2525 Broad St. Chattanooga, TN 37408
Address

kk@berrymilton.com
Email

4046
License #

[Signature]
Signature of Owner/Contractor/Officer of Corp.

\$ 1,534,408.00
Building Cost (excluding trades)

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Electrical Install Service Size: 400 Amps T-Poles: YES NO

Freedom Electric LLC
Electrical Contractor's Company Name

336-524-7070
Phone

2579 Eric Lane, Ste L Burlington, NC 27215
Address

zsize@freedomelectricllc.com
Email

31226-U
License #

[Signature]
Signature of Owner/Contractor/Officer of Corp.

\$ 165,000.00
Electrical Cost

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: HVAC Install # of Units: 1

Reliance Heating & Air Conditioning
Mechanical Contractor's Company Name

470-281-7758
Phone

1605 Buffalo Lake Rd. Sanford, NC 27332
Address

richard@reliance-hvac.com
Email

30603
License #

[Signature]
Signature of Owner/Contractor/Officer of Corp.

\$ 41,000.00
Mechanical Cost

PLUMBING CONTRACTOR INFORMATION

Description of Work: Plumbing Install # of Baths: 8

Webster & Sons Plumbing, Inc.
Plumbing Contractor's Company Name

336-992-2503
Phone

105 East Bodenhamer Street
Address

webstersplumbinginc@yahoo.com
Email

32541
License #

Austin Webster
Signature of Owner/Contractor/Officer of Corp.

\$ 77,300.00
Plumbing Cost

REFRIGERATION CONTRACTOR INFORMATION

Refrigeration Contractor's Company Name _____

Phone _____

Address _____

Email _____

License # _____

Signature of Owner/Contractor/Officer of Corp. _____

APPLICATION CONTINUES ON BACK



SPRINKLER CONTRACTOR INFORMATION

Sprinkler Contractor's Company Name

Phone

Address

Email

License #

Signature of Owner/Contractor/Officer of Corp.

FIRE ALARM CONTRACTOR INFORMATION

Fire Alarm Contractor's Company Name

Phone

Address

Email

License #

Signature of Owner/Contractor/Officer of Corp.

Driveway Access - NC Department of Transportation Driveway Access/Permit? YES NO

I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Signature of Owner/Contractor/Officer of Corp.

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

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

____ Has 3 or more employees and has obtained workers' compensation insurance to cover them,

____ Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

____ Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

Signature of Owner/Contractor/Officer of Corp.

Date