

*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: Duke Energy Date: 2/14/2024

Site Address: 1327 Jonesboro Rd Dunn, NC 28334 Phone: 919-539-0441

Directions to job site from Lillington: Take US-421/US Hwy 421 S to N Clinton AVE in Dunn and follow Carolina Dr. to Jonesboro Rd the project site is located on the left side of the road behind an existing local cemetery.

Subdivision: N/A Lot: PID: 0215270273

Description of Proposed Work: This is a weld shop structure. Water and sewer will not be needed.

Heated SF 841 Unheated SF 59

General Contractor Information: Building Cost \$ 131,905

Swinerton Builders

919-523-4604

Building Contractor's Company Name

Telephone

901 Berryhill Road, Suite C Charlotte, NC 28211

steve.raper@swinerton.com

Address

Email Address

DocuSigned by:
Kevin Smith
4E6BF24F81DD71B

73913

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

License #

Electrical Contractor Information: Electrical Cost \$ 10,000

Description of Work New electrical work Service Size: _____ Amps #T-Poles _____

South-Fair Electric

980-415-7527

Electrical Contractor's Company Name

Telephone

5243 Raynor Road Garner, NC 27529

jduncan@southfairelectric.com

Address

Email Address

James Duncan

Digitally signed by James Duncan
DN: cn=James Duncan@southfairelectric.com, o=South Fair Electric, cn=James
Duncan
Location: Raleigh NC
Reason: I have reviewed this document
Contact info: jduncan@southfairelectric.com
Date: 2025.02.17 14:53:04-05'00'

26552-U

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

License #

Mechanical Contractor Information: Mechanical Cost \$ N/A

Description of Work N/A # Units _____

N/A

N/A

Mechanical Contractor's Company Name

Telephone

N/A

N/A

Address

Email Address

N/A

N/A

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

License #

Plumbing Contractor Information: Plumbing Cost \$ N/A

Description of Work N/A # Baths N/A

N/A

N/A

Plumbing Contractor's Company Name

Telephone

N/A

N/A

Address

Email Address

N/A

N/A

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

License #

Insulation Contractor Information

N/A

N/A

Insulation Contractor's Company Name & Address

Telephone

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

Sprinkler Contractor Information

N/A	N/A
_____ Sprinkler Contractor's Company Name	_____ Telephone
N/A	N/A
_____ Address	_____ Email Address
N/A	N/A
_____ Signature of Officer(s) of Corporation	_____ License #

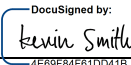
Fire Alarm Contractor Information

N/A	N/A
_____ Fire Alarm Contractor's Company Name	_____ Telephone
N/A	N/A
_____ Address	_____ Email Address
N/A	N/A
_____ 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.

 _____ Signature of Owner/Contractor/Officer(s) of Corporation	2/19/2025 _____ Date
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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.

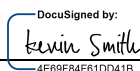
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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: Swinerton Builders

Sign w/Title:  _____ Division Manager	_____ Date:	2/19/2025
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