

\*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: F and S Land Development LLC Date: 5/1/2025  
Site Address: 94 Lunker LN, Fargway Varinga NC Phone: 919-346-1528  
Directions to job site from Lillington: Hwy N to Pinesy Grove Wilbon, Left onto Wagstaff to Hwy 42 to Lunker LN

Subdivision: N/A Lot: 6 John Douglas  
Description of Proposed Work: New Mini/self Storage Building 2

Heated SF 17,900 Unheated SF 5,800  
**General Contractor Information:** Building Cost \$ 950,000

Triangle Home Pros LLC  
Building Contractor's Company Name

6312 Laurens LN.  
Address

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

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

Description of Work Electric New Commercial Service Size: \_\_\_\_\_ Amps #T-Poles \_\_\_\_\_

NEC Power

Electrical Contractor's Company Name

117 Wild Blossom Drive Apex, NC 27539

Address

Digitally signed by Mike  
Niclaus

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

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

Description of Work \_\_\_\_\_ # Units \_\_\_\_\_

Custom AC Raleigh

Mechanical Contractor's Company Name

Address

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

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

Description of Work Plumbing New Commercial Bldg # Baths \_\_\_\_\_

Romanoff Group

Plumbing Contractor's Company Name

Address

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

**Insulation Contractor Information**

Betco Incorporated

Insulation Contractor's Company Name & Address

Telephone

THPHomes@gmail.com

Email Address

77019

License #

919-81-6624

Telephone

mike@necpower.com

Email Address

U.28370

License #

Telephone

Email Address

License #

# Baths

Telephone

Email Address

License #

800-654-7813

Telephone

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



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**COMMERCIAL**

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onto Wegstaff to Hwy 42 to Lunker LN

Subdivision: N/A Lot: 6 John Douglas

Description of Proposed Work: New Mini/self Storage **Building 2**

Heated SF 17,900 Unheated SF 5800  
**General Contractor Information:** Building Cost \$ 950,000

Triangle Home Pros LLC

Building Contractor's Company Name

6312 Laurens LN

Address

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

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

Description of Work Electric New Commercial Service Size: \_\_\_\_\_ Amps #T-Poles \_\_\_\_\_

NEC Power

Electrical Contractor's Company Name

Address

Telephone

THPHomePros@gmail.com

Email Address

77019

License #

Telephone

Email Address

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

**Mechanical Contractor Information:** Mechanical Cost \$ 95,900.00

Description of Work HVAC, New Commercial # Units 7

Custom AC Raleigh

Mechanical Contractor's Company Name

8809 Running Oak Drive Suite A Raleigh 27617

Address

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

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

Description of Work Plumbing New Commercial Bldg # Baths \_\_\_\_\_

Romanoff Group

Plumbing Contractor's Company Name

Address

License #

919-781-1789

Telephone

Richard@CustomACraleigh.com

Email Address

23261

License #

Telephone

Email Address

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

License #

**Insulation Contractor Information**

Betco Incorporated

Insulation Contractor's Company Name & Address

800-654-7813

Telephone

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



**Sprinkler Contractor Information**

N/A  
Sprinkler Contractor's Company Name

Telephone

Address

Email Address

Signature of Officer(s) of Corporation

License #

**Fire Alarm Contractor Information**

Fire Alarm Contractor's Company Name

Telephone

Address

Email Address

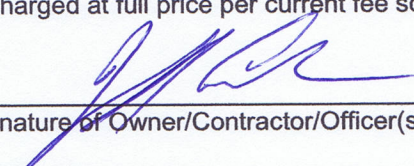
Signature of Officer(s) of Corporation

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

5/1/2025  
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

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.

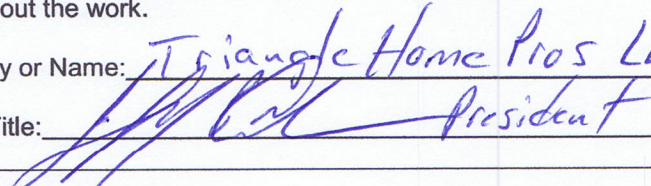
\_\_\_\_ Has no more than two (2) employees and no subcontractors.

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:

Triangle Home Pros LLC

Sign w/Title:

 President

Date:

5/1/2025