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COMMERCIAL BUILDING APPLICATION

CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

Site Address: 497 Airport Rd Erwin NC 28339 PIN: _____

Owner: Harnett Air, LLC Phone: 910-485-5790 Email: braynor@highlandpaving.com

Description of Proposed Work: Adding sitting area and private restroom Total Job Cost: \$ _____

GENERAL CONTRACTOR INFORMATION

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

Highland Paving Co. LLC 910-485-5790
General Contractor's Company Name Phone
PO Box 1843 Fayetteville NC 28302 rostendorf@highlandpaving.com
Address Email
55505 \$ 20,000
License # Signature of Owner/Contractor/Officer of Corp. *Brian Raynor* Building Cost (excluding trades)

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Lighting, receptacles Service Size: _____ Amps T-Poles: YES ☐ NO ☐
Jason H Pope Electrical Contractors 919-963-0001
Electrical Contractor's Company Name Phone
81 Beaver Creek Dr Dunn NC 28334
Address Email
27284 \$ 5,000
License # Signature of Owner/Contractor/Officer of Corp. *Jason Pope* Electrical Cost

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: HVAC # of Units: 1
Central Air
Mechanical Contractor's Company Name 919-963-0001
PO Box 175 Four Oaks NC 27524 Phone
Address Email
28699 \$ 5000
License # Signature of Owner/Contractor/Officer of Corp. *Travis Byrd* Mechanical Cost

PLUMBING CONTRACTOR INFORMATION

Description of Work: Plumbing # of Baths: 1
LR Glover Plumbing Inc 919-820-0026
Plumbing Contractor's Company Name Phone
PO Box 764 Benson NC 27504
Address Email
7958 \$ 3500
License # Signature of Owner/Contractor/Officer of Corp. *Derek Brewington* Plumbing Cost

REFRIGERATION CONTRACTOR INFORMATION

NA
Refrigeration Contractor's Company Name Phone
Address Email
License # Signature of Owner/Contractor/Officer of Corp.

APPLICATION CONTINUES ON BACK

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.

Jimmy Smith
 Signature of Owner/Contractor/Officer(s) of Corporation _____ Date 8-21-25

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: HIGHLAND PAVING CO., LLC
 Sign w/Title: Robt Oshel Project Manager Date: 8-21-25