



strong roots • new growth

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

### COMMERCIAL BUILDING APPLICATION

Site Address: 401 E. Jackson Blvd Erwin PIN: 1507-14-7076.000

Owner: Edward Miller Phone: 910 892 4551 Email: mlandscaping4551@aol.com

Description of Proposed Work: Install Power to Greenhouses Total Job Cost: \$ 34,000

### GENERAL CONTRACTOR INFORMATION

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

Edward Miller  
General Contractor's Company Name

910 892 4551  
Phone

401 E. Jackson Blvd Erwin NC  
Address

mlandscaping4551@aol.com  
Email

Edward Miller  
License # Signature of Owner/Contractor/Officer of Corp.

\$ 34,000  
Building Cost (excluding trades)

### ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Installing @ 400amp service

Service Size: 400 Amps T-Poles: YES  NO

Bryan Electrical Co Inc  
Electrical Contractor's Company Name

779 625-1505  
Phone

289 Blackman Rd Dunn NC 28334  
Address

bryan.electrical@yahoo.com  
Email

26215-L  
License # Signature of Owner/Contractor/Officer of Corp.

\$ 400  
Electrical Cost

### MECHANICAL/HVAC CONTRACTOR INFORMATION

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

\_\_\_\_\_  
Mechanical Contractor's Company Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email

\_\_\_\_\_  
License # Signature of Owner/Contractor/Officer of Corp.

\$ \_\_\_\_\_  
Mechanical Cost

### PLUMBING CONTRACTOR INFORMATION

Description of Work: \_\_\_\_\_ # of Baths: \_\_\_\_\_

\_\_\_\_\_  
Plumbing Contractor's Company Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email

\_\_\_\_\_  
License # Signature of Owner/Contractor/Officer of Corp.

\$ \_\_\_\_\_  
Plumbing Cost

### REFRIGERATION CONTRACTOR INFORMATION

\_\_\_\_\_  
Refrigeration Contractor's Company Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email

\_\_\_\_\_  
License # Signature of Owner/Contractor/Officer of Corp.

**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.

Edward Melts  
Signature of Owner/Contractor/Officer of Corp.

Date 12-22-25

**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

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.

Edward Melts  
Signature of Owner/Contractor/Officer of Corp.

Date 12-22-25