



strong roots • new growth

COMMERCIAL BUILDING APPLICATION

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

Site Address: 205 Day Dorm Rd PIN: 0670-74-7082.000

Owner: Campbell University Phone: 910-893-1200 Email: radams@campbell.edu

Description of Proposed Work: Build (4) new offices in open area Total Job Cost: \$ 85000

GENERAL CONTRACTOR INFORMATION

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

<u>Southeastern Construction of Buies Creek</u>	<u>919-282-2443</u>	
General Contractor's Company Name	Phone	
<u>PO Box 4200 Buies Creek, NC 27506</u>	<u>michael@si-nc.com</u>	
Address	Email	
<u>62649</u>		<u>\$ 85,000</u>
License #	<u>Michael Weaver</u>	Building Cost (excluding trades)
	Signature of Owner/Contractor/Officer of Corp.	

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: <u>Electrical per Plans</u>	Service Size: _____ Amps	T-Poles: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<u>Young's Electric Inc.</u>	<u>919-639-2297</u>	
Electrical Contractor's Company Name	Phone	
<u>10590 Hwy 210 N Angier NC 27501</u>	<u>Brian@youngselectric.com</u>	
Address	Email	
<u>04504-U</u>		<u>\$ 10,000</u>
License #	<u>* Brian Young</u>	Electrical Cost
	Signature of Owner/Contractor/Officer of Corp.	

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: <u>Mechanical per Plans</u>	# of Units: _____	
<u>Young's Electric Inc.</u>	<u>919-639-2297</u>	
Mechanical Contractor's Company Name	Phone	
<u>10590 Hwy 210 N Angier NC 27501</u>	<u>Brian@youngselectric.com</u>	
Address	Email	
<u>4469</u>		
License #	<u>* Brian Young</u>	
	Signature of Owner/Contractor/Officer of Corp.	
		<u>\$ 10,000</u>
		Mechanical Cost

PLUMBING CONTRACTOR INFORMATION

Description of Work: <u>Plumbing per Plans</u>	# of Baths: _____	
<u>Young's Electric Inc.</u>	<u>919-639-2297</u>	
Plumbing Contractor's Company Name	Phone	
<u>10590 Hwy 210 N Angier, NC 27501</u>	<u>Brian@youngselectric.com</u>	
Address	Email	
<u>4469</u>		
License #	<u>* Brian Young</u>	
	Signature of Owner/Contractor/Officer of Corp.	
		<u>\$ _____</u>
		Plumbing Cost

REFRIGERATION CONTRACTOR INFORMATION

<u>N/A</u>	
Refrigeration Contractor's Company Name	Phone
Address	Email
License #	Signature of Owner/Contractor/Officer of Corp.

APPLICATION CONTINUES ON BACK



SPRINKER CONTRACTOR INFORMATION

Carolina Fire Protection
Sprinkler Contractor's Company Name
4055 Hodges Chapel Rd Dunn NC 28334
Address
L.23769
License #

910-892-1700
Phone
SALES@CarolinaFireprotection.com
Email
Jeffrey Dunn
Signature of Owner/Contractor/Officer of Corp.

FIRE ALARM CONTRACTOR INFORMATION

Fire Alarm Contractor's Company Name
Address
License #

Phone
Email
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.

Michael Weaver
Signature of Owner/Contractor/Officer of Corp.

4/16/26
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.

Michael Weaver
Signature of Owner/Contractor/Officer of Corp.

4/16/26
Date