Docusign Envelope ID: 6877346F-A3C4-82C3-8142-C5B324D09310

Harnett COUNTY NORTH CAROLINA

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

COMMERCIAL BUILDING APPLICATION

Site Address: ~~459~~ 445 Leslie Campbell Ave, Bouies Creek, NC 27506 **PIN**: _____

Owner: Campbell University **Phone**: _____ **Email**: _____

Description of Proposed Work: Upfit of Sushi Restaurant to Shake Smart **Total Job Cost**: $ $150,000

GENERAL CONTRACTOR INFORMATION

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

Westroc Construction, LLC — General Contractor's Company Name
(252) 382-1025 — Phone
~~PO Box 1367, Wrightsville Beach, NC 28580~~ 1400 Old Lamplighter Way Wilmington, NC 28403 — Address
operations@westrocnc.com — Email
68478 — License #
DocuSigned by: Michael Barnhill E713A37EE9514F8... — Signature of Owner/Contractor/Officer of Corp.
$ $120,000 **Building Cost** (excluding trades)

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Lights and Outlets Service Size: 100 Amps T-Poles: YES ☐ NO ☒

Electrical Solutions NC — Electrical Contractor's Company Name
(910 237-0246 — Phone
902 Friendly Rd Dunn NC 28334 — Address
electricalsolutionsnc@gmail.com — Email
U22659 — License #
DocuSigned by: D80CD1A6FAF94AC... — Signature of Owner/Contractor/Officer of Corp.
$ 20,000 **Electrical Cost**

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: N/A # 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: Sink and Drain # of Baths: _____

Lira Plumbing — Plumbing Contractor's Company Name
(984) 308-4794 — Phone
~~2000 Brentwood RD STE 4, Raleigh, NC 27604~~ 566 Rose Ln Raleigh, NC 27510 — Address
liraplumbing@gmail.com — Email
29810 — License #
Signed by: DE3A87EAD5E1457... — Signature of Owner/Contractor/Officer of Corp.
$ 10,000 **Plumbing Cost**

APPLICATION CONTINUES ON BACK

Docusign Envelope ID: 6877346F-A3C4-82C3-8142-C5B324D09310

Harnett COUNTY NORTH CAROLINA

REFRIGERATION CONTRACTOR INFORMATION

N/A

Refrigeration Contractor's Company Name _____ Phone _____

Address _____ Email _____

License # _____ Signature of Owner/Contractor/Officer of Corp. _____

SPRINKER CONTRACTOR INFORMATION

N/A

Sprinkler Contractor's Company Name _____ Phone _____

Address _____ Email _____

License # _____ Signature of Owner/Contractor/Officer of Corp. _____

FIRE ALARM CONTRACTOR INFORMATION

N/A

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.

DocuSigned by: Michael Barnhill F713A37FF9514F8...

Signature of Owner/Contractor/Officer of Corp.

9/28/2026

Date

APPLICATION CONTINUES ON BACK

Docusign Envelope ID: 6877346F-A3C4-82C3-8142-C5B324D09310

Harnett COUNTY NORTH CAROLINA

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

x
_____ 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,

x
_____ 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.

DocuSigned by:
Michael Barnhill
F713A37FF9514F8...
Signature of Owner/Contractor/Officer of Corporation

9/28/2026
Date