\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on

Application # 08-50019405

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
COMMERCIAL

Application for Power

Application for Building and Trades Permit
Owner's Name: William R. Pannhoff / B-B Caturing Date: 3-6-08
Site Address: 697 Bythe Baptist Rd Phone: 910 497-8228
Directions to job site from Lillington:
Take 210 South towards Spring lake Go left on
Bithel Baptist Rd, a mile on left side
Subdivision:Lot:
Description of Proposed Work: Install Build new Kitchen Facility behind un
Heated SF 3500 Unheated SF 2700 Structure General Contractor Information Building Cost \$ \$160,000.00
B:B Catering : Event Planning 910-497-8278
B: B Catering : 2vent Planning Building Contractor's Company Name  910-497-8228  Telephone
67 Bithel Baptist Rd Spring lase NC 28340 DUNCE
Address License #
Must sign & fill out second page Signature of Owner/Contractor/Officer(s) of Corporation
Electrical Permit Information   Elec Cost \$
Description of WorkService Size:Amps #TPoles
Electrical Contractor's Company Name
HIP MAIN
Address License #
<del></del>
Signature of Officer(s) of Corporation  Mechanical Permit Information Mech Cost \$
Description of Work # Units
Mechanical Contractor's Company Name Telephone
Address
Address License #
Signature of Officer(s) of Corporation
Plumbing Permit Information Plumb Cost \$
Description of Work# Baths
Physics Control of Con
Plumbing Contractor's Company Name Telephone
Address License #
Signature of Officer(s) of Corporation
Insulation Permit Information
Insulation Contractor's Company Name & Address Telephone

Applicatio	n #			

Sprinkler Sys	stem Information	
Sprinkler Contractor's Company Name	Contact & Telephone	-
Address	License #	-
Signature of Officer(s) of Corporation	vstem Information	
	<u>stem information</u>	
Fire Alarm Contractor's Company Name	Contact & Telephone	•
Address	License #	•
Signature of Officer(s) of Corporation <u>Driveway Access</u> - NC Department of Transport	ortation Driveway Access/Permit? Yes	No
I hereby certify that I have the authority to make nect and that the construction will conform to the regul Mechanical codes, and the Harnett County Zoning Contractors is correct as known to me and if any chanumber of bedrooms, building and trade plans, Environmental Changes, I certify it is my responsibility to notify the lany and all changes.  Signature of Owner/Contractor/Officer(s) of Corporation	lations in the Building, Electrical, Plumbing Ordinance. I state the information on the a nges occur including listed contractors, site onmental Health permit changes or proposed Harnett County Central Permitting Department	g and above plan, d use
Affidavit for Worker's Co	ompensation N.C.G.S. 87-14	
General Contractor Owner	Officer/Agent of the Contractor or Owne	r
Do hereby confirm under penalties of perjury that the set forth in the permit:	person(s), firm(s) or corporation(s) performing	ng the work
Has three (3) or more employees and has obta	lined workers' compensation insurance to co	ver them.
Has one (1) or more subcontractors(s) and has them.	s obtained workers' compensation insurance	to cover
Has one (1) or more subcontractors(s) who has covering themselves.	s their own policy of workers' compensation i	insurance
11		
Has no more than two (2) employees and no si	ubcontractors.	
While working on the project for which this permit is so Department issuing the permit may require certificates to issuance of the permit and at any time during the percarrying out the work.	ought it is understood that the Central Permits of coverage of worker's compensation insu	rance prior
While working on the project for which this permit is so Department issuing the permit may require certificates to issuance of the permit and at any time during the percarrying out the work.	ought it is understood that the Central Permits of coverage of worker's compensation insu	rance prior

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

## Application # 08500 194 - 05

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
COMMERCIAL

### **Application for Building and Trades Permit**

Owner's Name:	Date:	
Site Address:	Phone:	_
Directions to job site from Lillington:		
	<del></del>	
Subdivision:	Lot: _	
Description of Proposed Work:		
Heated SF Unheated SF General Contractor Informati	on Building Cost \$	<del></del>
Building Contractor's Company Name	Telephone	
Address		License #
Cignotium of Ourney/Control to 10th out of Ourney/Control	Must sign & fill out secon	nd page
Signature of Owner/Contractor/Officer(s) of Corporation  Electrical Permit Informat		
Description of WorkServi	ce Size:Amps	#TPoles
Electrical Contractor's Company Name	Telephone	
Address		License #
0:	d	. 2
Signature of Officer(s) of Corporation  Mechanical Permit Informati	ion Mech Cost \$ 65	W and
Description of Work Piff Refrescritory Faut		5
	· / ~ ~ ~ .	002 490
Mechanical Contractor's Company Name	Telephone	123-0921
5906 ST. Michbek Delre	FAM ALL	41102
Addless	179.	License #
Wany Fredu	28306	
Signature of Officer(s) of Corporation		
Plumbing Permit Information	on Plumb Cost \$	
Description of Work	# Bath	ns
Plumbing Contractor's Company Name	Telephone	<u></u>
Address		License #
Signature of Officer(s) of Corporation Insulation Per	mit information	
nsulation Contractor's Company Name & Address		Telephone

Application # 08500 K

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 Telephone Number 910-893-7525 Fax 910-893-2793 www.harnett.org

Certification of Work Performed By Owner/Contractor

Standard of the fine by Standa
Owner (s) of Structure: B+B Cataling Phone: 910-497-8228
Owner (s) Mailing Address: 697 Retact CHURCH Road
Spr. ig Lake NC 128390
Land Owner Name (s): BILC PANNOTT Phone: 910-497-8228
Construction or Site Address: 697 Bethel CHURCH KOAD - Speing LAKE
PIN or Parcel #: 01-0524 0024 05
Job Cost: 35,00 Description of Work to be done Electrical Justicial
LON KESTAURANT CONSTR
Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping \ \Po(E
Electrical: 200 Amp <200 Amp Service Change Service Reconnect Other
Plumbing: Water/Sewer Tap Number of Baths Water Heater
Specific Directions to Job from Lillington: TAKE 210 South to Bethel CHURCH ROAD ANDERSON CROCK) FURN Last Go 2 Miles Job is Lucated On Lest 14 And Sive of Koan
Subdivision: Lot #:
nave provided or will provide the Electric labor (Centractors Name)  on this structure. I am the building owner or hold a NC state Electrica (Irade)  (Trade)
number
work shall comply with the State Building Code and all other applicable State and local laws,
ordinances and regulations.
Structure owner(s) signature: Juno hy 3/26/08
Company Name: Puis S Electric Phone: 910-893-8515
Address: 136 DANNO'S LAME SORING LOKE NC 28390
County: HARNOTT Contractor's License #: 7510 - U
Contractor's Signature: 18molto 5 To 60 Date: 3 2608
*Company name, address, & phope must match information on license.

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
Telephone Number 910-893-7525 Fax 910-893-2793
www.harnett.org/permits
Certification of Work Performed By Owner/Contractor

Owner (s) of	Structure: JOANN CLARK	/	Phone: 9/0-447-822	9
Owner (s) M	ailing Address: 697 BETHE	L BARTIST R	A	<u></u>
	SPRING LA	RE NC 28	390	_
Land Owner	Name (s): JOANN CLARKE	/	Phone: 9/0-497-822	0
Construction	or Site Address: 697 BETH	EL BAPTIST	Ps)	<u></u>
PIN or Parce	1#: 01-0524-05			_
	2,045 Description of Work to b			_
Mechanical:	New Unit With Ductwork Ne	w Unit Without Ducty	vork _ Gas Piping	
Electrical:	200 Amp <200 Amp S	ervice Change	Service Reconnect Othe	:r
Plumbing:	Water/Sewer Tap 9 Numb	er of Baths _/	Nater Heater ${\cal A}$	
Specific Direc	tions to Joh from Ullington: ACHEO			<u>-</u>
Subdivision: _		Lot #:		<del>-</del>
EDWIN R. (Contrac	TYPERVZIE will provide the tors Name)	PumBING (Trade)	labor on this struct	ure.
I am the buildir	ng owner or my NC state license	number is <u>135</u>	58, which entitles me	to to
	ork on the above structure legall			
	oplicable State and local laws, or			0000
Structure owne	r(s) signature:		Date:	_
Company Name	: MCKENZIE PLUMB!	AG Phone	910-764-2200	
	: 231 WINSLOW STRE		VILLE NO 28301	•
County:	Cumberland		ense #: /3588	•
_	or's Signature: 2. Sucy	an N/ Li	Date: 3/25/08	
*Compa	ny name, address, & phone mi	let metch informat		

## McKENZIE PLUMBING

231 Winslow Street . Fayetteville, NC 28301

Phone: 910-764-2200

E-mail: susan@mckenzieplumbing.com

March 25, 2008

B & B Catering & Event Planning 697 Bethel Baptist Road Spring Lake, NC 28390

## **JOB LIST**

5 Floor Sinks
1 Shower Drain
15 Floor Drains
1 Lavatory
50' Trench Drain
1 Water Closet

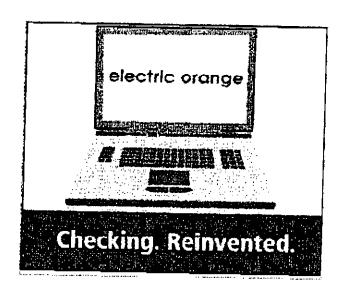
4 Hand Sinks

1 Can Wash 1 Ice Machine

1 Washing Machine Connection 4 Hose Real Stations

2 Tankless Hot Water Heater Commercial Liners

# MAPQUEST,



		Total Time: 19 minutes	Total Distance: 13.52 miles	ton-en-len (ann ppropriessing)
B:	697 Be	thel Baptist Rd, Spring Lake, NC 2839	0-8689	P. STORAN W. STANIS (Manager)
_			Estimated Distance: 13.52 miles	1905 M. 100 M. 1
	END	5: End at 697 Bethel Baptist Rd Spring	Lake, NC 28390-8689	
	<b>(</b>	4: Turn LEFT onto BETHEL BAPTIST	RD.	0.8 mi
	310	3: Turn SLIGHT RIGHT onto NC-210 (	N.	12.0 mi
		2: Turn LEFT onto S MAIN ST/US-401 ST/US-401/NC-210.	I/NC-210/NC-27. Continue to follow S MAIN	0.5 mi
	START	1: Start out going WEST on E FRONT	ST toward 1ST ST.	0.1 mi
		Front St, Lillington, NC 27546-6683		

Application # 0857017405

Please note if this application is part of a job in progress with open permits.

yes no

### Mail In application

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Certification of Work Performed by Owner/Contractor

### **Contractor Information**

I, Jerry Hall will complete the HVAC work on the project or
Name) (Trade) structure herein described. My state license number is 23240. All work shall comply with the
State Building Code and all other applicable State & Local law, ordinances and regulations.
Company Name: Total Systems Heading & Cooling Ive Mailing Address: 13341 Husy 2105
Street Address: Spring Laure NC 28390
Business Phone: 910.431, 3450 Email Address:
*Company name, address, & phone must match information on license.
Job Information 2
Land Owner's Name: Bill Robert Phone: 910-497-8338
Tenant/Building Owner(if different): Phone:
Construction or Site Address: Leg 7 Belliel Pape & Rd, Spring Lake 12 38390
PIN or Parcel # from GIS:
Specific Directions to Job from Lillington: From Lillwoton take they 2000 toward Spring halve. Tribe 1841 anto Balber Ch Rd to Para at 197
Description of work to be done:
Permit Cost
Permit Fee: \$\frac{1\to 8^{\infty}}{2} \tag{calculated from fee schedule}
Mail In Processing Fee: \$3.00 per application
Total Enclosed: \$
Make check payable & Mail completed application form to:  Harnett County Central Permitting (HCCP) PO Box 65 Lillington, NC 27546
Contractor's Signature:

Application # 08 5 001940

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793

www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of	Structure: 💆	D 64+6	7-110/9	Prione	: <u>910476</u>	77.
	iling Address:	697 BE	the Busi	tist Rd.		
	<u>.</u>	SDRING	LAKE N.	C. 28390	) B	
Land Owner	Name (s): 🏒	11/ 00	NNhoff	Phone	: 91049	782
	or Site Address:		<u> </u>			
PIN or Parce	# from GIS:					
Job Cost: Z	Descrip	ption of Work to	o be done			
Mechanical:			<i>トチリ</i> み行っ New Unit Withou		Gas Piping _	
Electrical*:	200 Amp * For Progress Er	<200 Amp	Service Change we need the premise	e Service e number	e Reconnect	_ Other
Plumbing:	Water/Sewer T	ap Nu	mber of Baths	Water l	Heater	
Specific Dire	itions to Job from	m Lillington:				
Specific Direction:				Lot #:		
Subdivision:	COACH	will provide	the <u>Hoad</u> 7	TSHN/ (Trade)	labor on th	is struct
Subdivision:	COACH	will provide		TSHN/ (Trade)	labor on th	is structi
Subdivision:  I MASTE (Contra)	COACT ctors Name) ing owner or my	_ will provide to NC state licer	the <u>//oac/ 7</u>	TSHI (Trade)	labor on th	is struct itles me
Subdivision:  I MASTE (Contra) I am the build	ctors Name) ing owner or my work on the abo	_ will provide to NC state licerove structure le	the <i>Hoad H</i> nse number is _ egally. All work	(Trade)  Shall comply v	labor on th , which ent with the State E	is struct itles me
Subdivision:  I MASTE (Contra) I am the build	ctors Name) ing owner or my work on the abo	_ will provide to NC state licerove structure le	the <u>//oac/ 7</u>	(Trade)  Shall comply v	labor on th , which ent with the State E	is struct itles me
Subdivision:  I MASTO (Contra) I am the build perform such and all other	ctors Name) ing owner or my work on the abo	will provide of NC state licerove structure leads and local laws	the <i>Hoad H</i> nse number is _ egally. All work	(Trade)  Shall comply v	labor on th , which ent with the State E	is structi
Subdivision:  I MASTE (Contra)  I am the build perform such and all other  Structure own	ctors Name) ing owner or my work on the abo applicable State er(s) signature:	will provide of NC state licerove structure leads and local laws	the //oad A	(Trade) shall comply with the distributions.	labor on th , which ent with the State E	is struct itles me Building
Subdivision:  I MASTER (Contra) I am the build perform such and all other Structure own	ctors Name) ing owner or my work on the abo applicable State er(s) signature:	will provide to NC state licerove structure less and local laws	the Hoad Honse number isegally. All work is, ordinances and	(Trade) shall comply with the distributions.	labor on th , which ent with the State E	is struct itles me Building
Subdivision:  I MASTER (Contra) Contra I am the build perform such and all other Structure own Company Na Addre	ctors Name)  ing owner or my  work on the abo  applicable State  er(s) signature:  me: MAST  ss: 1539	will provide of NC state licerove structure leads and local laws	the Hoad Honse number is _ egally. All work s, ordinances an	chall comply was discounted by the complete of	labor on the labor	is struct itles me Building
Subdivision:  I MASTER (Contra) Contra I am the build perform such and all other Structure own Company Na Addre Count	ctors Name) ing owner or my work on the abo applicable State er(s) signature:	will provide to NC state licerove structure less and local laws	the Hoad Honse number is _ egally. All work s, ordinances an	(Trade) shall comply with the distributions.	labor on the labor	is structi

4/08

4/18/08

Application # \_

# Harnett County Central Permitting PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793

www.harnett.org/permits
Certification of Work Performed By Owner/Contractor (Individual Trade Application)

Owner (s) of S	Structure: Bill Panhoff Bub Catering Phone: 910-497-8228
Owner (s) Ma	iling Address: 697 Bothel Baptist Rd
	Spring Lake NC 28390
Land Owner N	Name (s): Phone:
Construction (	or Site Address: 691 Bother Baptist Rd Spring Lake NC 283
PIN or Parcel	# from GIS:
Job Cost:	Description of Work to be done
Mechanical:	New Unit With Ductwork New Unit Without Ductwork Gas Piping
Electrical*:	200 Amp <200 Amp Service Change Service Reconnect Other  * For Progress Energy customers we need the premise number
Plumbing:	Water/Sewer Tap Number of Baths Water Heater
Specific Direct	etions to Job from Lillington:
Subdivision:	Lot #:
I Jan Kins (Contra)	S Gas Co will provide the Gas Pipino labor on this structure.  (Trade) ding owner or my NC state license number is 21001, which entitles me to
perform such	work on the above structure legally. All work shall comply with the State Building Code
and all other	applicable State and local laws, ordinances and regulations.
Structure ow	ner(s) signature: Date:
Company Na	ess: 3000 Legion Rd Hope Mills NC 28348
Coun	ty: Cum her and Contractor's License #: 21001
	ractor's Signature: (Lesmur Chemy Date: 6-18-0)
*Con	nnany name, address, & phone must match information on license.