

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # 17-50040593
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: Anderson Creek Partner, LP Date: 8-28-17

Site Address: _____ Phone: 910-814-2633

Directions to job site from Lillington: Left on Main, Rt on 270, Left on Nursery, Left onto RAN Rd, Left on Anderson Creek Dr, Rt on Burns Ln E, Rt on Whispering Pines Dr, Past Anderson Lake Dr, Rt on Schuler Dr. Destination on Rt.

Subdivision: Anderson Creek Club Lot: N/A

Description of Proposed Work: Build Gym and Pool

Heated SF 2295 Unheated SF _____

General Contractor Information: Building Cost \$ 176,064

Anderson Creek Developers, Inc

910-814-2633

1710.00

Building Contractor's Company Name

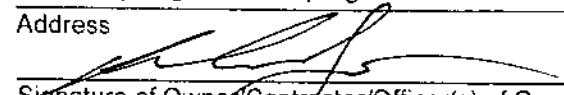
Telephone

125 Whispering Pines Dr. Spring Lake NC 28390

andybarr40@yahoo.com

Address

Email Address



66285

Signature of Owner/Contractor/Officer(s) of Corporation

License #

Electrical Contractor Information: Electrical Cost \$ 8,896

Description of Work Wire/Trim out Service Size: 200 Amps #T-Poles 1

300.00

Pioneer Electric, Inc

919-499-7767

Electrical Contractor's Company Name

Telephone

80 Neill Thomas Rd. Lillington NC 27546

pioneerelectric@earthlink.net

Address

Email Address



21643-0

Signature of Owner/Contractor/Officer(s) of Corporation

License #

Mechanical Contractor Information: Mechanical Cost \$ 18,612

Description of Work Rough in and trim out HVAC # Units 1

300.00

Total Systems Heating and Cooling, Inc.

910-436-3450

Mechanical Contractor's Company Name

Telephone

13341 Hwy 210 South Spring Lake NC 28390

Address

Email Address



28846 112/113

Signature of Owner/Contractor/Officer(s) of Corporation

License #

Plumbing Contractor Information: Plumbing Cost \$ 10,428

Description of Work Rough In and trim out Plumbing # Baths 2

300.00

Wagner Plumbing Inc.

910-890-2299

Plumbing Contractor's Company Name

Telephone

555 Tirzah Dr. Lillington NC

wagnerplumbing@yahoo.com

Address

Email Address



31576

Signature of Owner/Contractor/Officer(s) of Corporation

License #

Insulation Contractor Information

Tri-City Insulation

910-237-0910

Insulation Contractor's Company Name & Address

Telephone

50⁰⁰ plan review
25⁰⁰ UND USE
100⁰⁰ FM - (approve)

*NOTE: General Contractor must fill out and sign the second page of this application

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Officer(s) of Corporation _____ License # _____

Fire Alarm Contractor Information

Holmes Electric Security
Fire Alarm Contractor's Company Name _____ Telephone 910-483-6922

127 HAY ST. FARMVILLE NC 28201
Address _____ Email Address _____

[Signature]
Signature of Officer(s) of Corporation _____ License # 10174 SP-LV

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 Hamett 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 Hamett 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.

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation _____ Date 8-28-17

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: ANDERSON CREEK DEV. INC.

Sign w/Title: [Signature] PROJECT MGR. Date: 8-28-17