



*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.

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-7793 www.harnett.org/permits
COMMERCIAL

Application # _____
Application for Building and Trades Permit

Owner's Name: Crete Solutions, LLC Date: _____
Site Address: 2520 US 401 N Lillington, NC 27546 Phone: 910-386-7967
Description of Proposed Work: Concrete Plant

General Contractor Information: Building Cost \$ _____

HIGHLAND PAVING CO. LLC
Building Contractor's Company Name

910-485-5790
Telephone

P.O. Box 1843 FAYETTEVILLE NC 28302
Address

dbyardch@hlandpaving.com
Email Address

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

55505
License #

Electrical Contractor Information: Electrical Cost \$ 25,000.00

Description of Work Wiring Concrete Plant Service Size: 250 Amps #T-Poles _____

Ray Lanier Electrical Contracting
Electrical Contractor's Company Name

910-289-5720
Telephone

P.O. Box 228 Wallace N.C. 28466
Address

ray.lanier@electric@yahoo.com
Email Address

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

11921-1
License #

Mechanical Contractor Information: Mechanical Cost \$ N/A

Description of Work N/A

Units N/A

N/A

N/A

Mechanical Contractor's Company Name

Telephone

N/A

N/A

Address

Email Address

N/A

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

License #

Plumbing Contractor Information: Plumbing Cost \$ N/A

Description of Work N/A

Baths N/A

N/A

N/A

Plumbing Contractor's Company Name

Telephone

N/A

N/A

Address

Email Address

N/A

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

License #

Insulation Contractor Information

N/A

N/A

Insulation Contractor's Company Name & Address

Telephone

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



Sprinkler Contractor Information

N/A	N/A
Sprinkler Contractor's Company Name	Telephone
N/A	N/A
Address	Email Address
	N/A
Signature of Officer(s) of Corporation	License #

Fire Alarm Contractor Information

N/A	N/A
Fire Alarm Contractor's Company Name	Telephone
N/A	N/A
Address	Email Address
	N/A
Signature of Officer(s) of Corporation	License #

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

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

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.

Sign w/Title: _____ Date: _____