



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 # \_\_\_\_\_

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: Paul Barbour & Son Inc. Wilmington Date: 2/1/2022

Site Address: 11496 Hwy. 401 South, Fuqay Varina, NC 27526 Phone: 910-520-8205

Description of Proposed Work: New Office Building

**General Contractor Information:** Building Cost \$ 200000.00

Owner/ Builder Paul Barbour & Son Inc. Telephone 910-520-8205

Building Contractor's Company Name J's Electrical Inc Telephone 919-803-9192

PO Box 157, Castle Hayne, NC 28457 Email Address bpbarbour@gmail.com

Address 11496 Hwy. 401 South, Fuqay Varina, NC 27526 Email Address U.25612

Signature of Owner/Contractor/Officer(s) of Corporation [Signature] License # \_\_\_\_\_

**Electrical Contractor Information:** Electrical Cost \$ 9000.00

Description of Work Building Electrical 220v/120V Service Size: 400 Amps #T-Poles 0

J's Electrical Inc Telephone 919-803-9192

Electrical Contractor's Company Name J's Electrical Inc Telephone 919-803-9192

2229 Wade Nash Road, Holly Springs, NC 27540 Email Address evl800@earthlink.net

Address 2229 Wade Nash Road, Holly Springs, NC 27540 Email Address U.25612

Signature of Owner/Contractor/Officer(s) of Corporation [Signature] License # \_\_\_\_\_

**Mechanical Contractor Information:** Mechanical Cost \$ 18000.00

Description of Work building heat pump and ductwork # Units 2

Pleasant Air Inc. Telephone 910-270-3934

Mechanical Contractor's Company Name Pleasant Air Inc. Telephone 910-270-3934

151 Sloop Point Road, Hampstead, NC 28443 Email Address david@pleasantair.com

Address 151 Sloop Point Road, Hampstead, NC 28443 Email Address 23349

Signature of Owner/Contractor/Officer(s) of Corporation [Signature] License # \_\_\_\_\_

**Plumbing Contractor Information:** Plumbing Cost \$ 18000

Description of Work building plumbing system # Baths 3

Capps Construction & Plumbing Inc. Telephone 919-567-0919

Plumbing Contractor's Company Name Capps Construction & Plumbing Inc. Telephone 919-567-0919

1202 S. Main Street, Fuquay Varina, NC Email Address ccpi4u@earthlink.net

Address 1202 S. Main Street, Fuquay Varina, NC Email Address L13946

Signature of Owner/Contractor/Officer(s) of Corporation [Signature] License # \_\_\_\_\_

**Insulation Contractor Information**

Paul Barbour & Son Inc. Telephone 919-552-0747

Insulation Contractor's Company Name & Address Telephone 919-552-0747

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

**Sprinkler Contractor Information**

<u>None</u> Sprinkler Contractor's Company Name	_____ Telephone
_____ Address	_____ Email Address
_____ Signature of Officer(s) of Corporation	_____ License #

**Fire Alarm Contractor Information**

<u>None</u> Fire Alarm Contractor's Company Name	_____ Telephone
_____ Address	_____ Email Address
_____ 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.

<u>[Signature]</u> Signature of Owner/Contractor/Officer(s) of Corporation	2-1-22 Date
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**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: <u>[Signature]</u>	Date: <u>2-16-22</u>
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