

Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 – Physical Address – 420 McKinney PKWY Lillington NC 27546

Ph.: 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: Lowe's Home Center Phone: 800-445-6937

Owner (s) Mailing Address: 1000 Lowes Blvd
Mooresville, NC 28117

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: 524 E Jackson Blvd

PIN # _____ Parcel # 1507-53-7367

Job Cost (Required): \$100,684.17 Description of Work to be done Changing lights to LED's

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

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 Directions to Job from Lillington: Take McKinney Pkwy to 421 and turn
right, go straight down 421 and the location will be on your left. Across
the street from Wendy's.

Subdivision: _____ Lot #: _____

I Lin R. Rogers will provide the Electrical labor on this structure.
(Contractor's Name) (Trade)

I am the building owner or my NC state license number is U.09890, 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.

Lin R. Rogers Electrical Contractors Inc.

Contractor's Company Name

2050 Marconi Dr. Alpharetta GA 30005

Address

U.09890

License #

770.772.3400

Telephone

license@LRogersElectric.com

Email Address

Structure Owner / Contractor Signature: [Signature] Date: 4/6/22

By signing this application, you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**

Faxed or Mailed application could have an approximately 1-5 day process time



Town of Erwin
Zoning Application & Permit
 Planning & Inspections Department

Permit #

Rev Sep2014

Each application should be submitted with an attached plot/site plan with the proposed use/structure showing lot shape, existing and proposed buildings, parking and loading areas, access drives and front, rear, and side yard dimensions.

Name of Applicant	Lin P. Rogers	Property Owner	LOWES 1777
Home Address	2020 marconi Dr. St. 100	Home Address	524 Jackson Blvd.
City, State, Zip	Alpharetta, GA 30005	City, State, Zip	erwin, NC 28339
Telephone	678 701 6692	Telephone	910 897 1120
Email	llcense@rogerselectric.com	Email	

524 E
 JACKSON

Address of Proposed Property	524 Jackson BLVD Erwin, NC 28339		
Parcel Identification Number(s) (PIN)	1507-53-7367.00	Estimated Project Cost	\$105,802
What is the applicant requesting to build / what is the proposed use of the subject property? Be specific.	Electrical Commercial		
Description of any proposed improvements to the building or property	Change lights to LED lights		
What was the Previous Use of the subject property?	commercial		
Does the Property Access DOT road?	YES		
Number of dwelling/structures on the property already	1	Property/Parcel size	14.36
Floodplain SFHA <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Watershed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Wetlands <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
MUST circle one that applies to property	Existing/Proposed Septic System <input type="checkbox"/> Or Existing/Proposed <u>County/City Sewer</u>		

SD
 YAL

Owner/Applicant Must Read and Sign

The undersigned property owner, or duly authorized agent/representative thereof certifies that this application and the forgoing answers, statements, and other information herewith submitted are in all respects true and correct to the best of their knowledge and belief. The undersigning party understands that any incorrect information submitted may result in the revocation of this application. Upon issuance of this permit, the undersigning party agrees to conform to all applicable town ordinances, zoning regulations, and the laws of the State of North Carolina regulating such work and to the specifications of plans herein submitted. The undersigning party authorizes the Town of Erwin to review this request and conduct a site inspection to ensure compliance to this application as approved.

Lin P Rogers		6/22/21
Print Name	Signature of Owner or Representative	Date

For Office Use

Zoning District	B-2	Existing Nonconforming Uses or Features	
Front Yard Setback		Other Permits Required	<input type="checkbox"/> Conditional Use <input type="checkbox"/> Building <input type="checkbox"/> Fire Marshal <input checked="" type="checkbox"/> Other
Side Yard Setback		Requires Town Zoning Inspection(s)	<input type="checkbox"/> Foundation <input type="checkbox"/> Prior to C. of O.
Rear Yard Setback		Zoning Permit Status	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied
		Fee Paid: 25	Date Paid: 6/22/21 Staff Initials: msh

Comments	
Signature of Town Representative: Snow Bouch	Date Approved/Denied: 6/23/2021

NO Changes to building footprint
 - Changing out existing lights to LED lights

PAID

JUN 30 2021

TOWN OF ERWIN

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