

\*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  
420 McKinney Pkwy Lillington, NC 27546  
PO Box 65 Lillington, NC 27546  
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

**COMMERCIAL**

**Application for Building and Trades Permit**

Owner's Name: T+L Coats, LLC Date: 1-11-2023

Site Address: 320 E. Stewart St., Coats, NC 27521 Phone: (910) 890-3256

Directions to job site from Lillington: take Hwy. 27 to Coats, cross Hwy. 55 towards Benson ... site will be on the right. Enter next to University Storage at 310 N. Orange St., Coats, NC

Subdivision: ~~Office Construction for Unit 320 E. Stewart St.~~

Description of Proposed Work: upfit construction for unit 320 E. Stewart St.

Heated SF 1750 Unheated SF \_\_\_\_\_

**General Contractor Information:** Building Cost \$ 11,115

Barefoot Building Company, L.L.C.

Building Contractor's Company Name

P.O. Box 1461, Coats, NC 27521

Address

[Signature]

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

**Electrical Contractor Information:** Electrical Cost \$ 9,796

Description of Work installation of electrical system Service Size: 200 Amps #T-Poles \_\_\_\_\_

Reliant Electric and Power

Electrical Contractor's Company Name

222 Normandy Drive, Clayton, NC

Address

[Signature]

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

**Mechanical Contractor Information:** Mechanical Cost \$ 12,632

Description of Work installation of HVAC system # Units 1

Fayetteville Heating and Air Contractors Inc.

Mechanical Contractor's Company Name

6458 Songi Ln., Fayetteville, NC

Address

[Signature]

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

**Plumbing Contractor Information:** Plumbing Cost \$ 4,335

Description of Work installation of plumbing system # Baths \_\_\_\_\_

Fred Andrew Chris Leazer, III

Plumbing Contractor's Company Name

115 Keyman Drive, Coats, NC

Address

[Signature]

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

**Insulation Contractor Information**

\* Installed by creator

Insulation Contractor's Company Name & Address

Telephone

\*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

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.

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

10/17/2022  
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.

Company or Name: Bowfast Building Company, LLC

Sign w/ Title: [Signature], Member/Manager Date: 10/17/2022