

*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: 8/21/2024
Site Address: 330 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.

Subdivision: N/A Lot: _____
Description of Proposed Work: upfit construction for Mama B's Southern Kitchen
Heated SF 3500 Unheated SF _____

General Contractor Information: Building Cost \$ 50,000.00
Barefoot Building Company, LLC Telephone (910) 890-3256
Building Contractor's Company Name
Po Box 1411, Coats, NC 27521 Email Address wrbarefoot@yahoo.com
Address
[Signature] License # 81627
Signature of Owner/Contractor/Officer(s) of Corporation

Electrical Contractor Information: Electrical Cost \$ 35,000.00
Description of Work installation of electrical system Service Size: 400 Amps #T-Poles in place
Reliant Electric and Power Telephone (919) 632-6963
Electrical Contractor's Company Name
222 Normandy Drive, Clayton, NC Email Address _____
Address
[Signature] License # 295884
Signature of Owner/Contractor/Officer(s) of Corporation

Mechanical Contractor Information: Mechanical Cost \$ 60,000.00
Description of Work installation of HVAC systems # Units 4
Tom Heating + Air Condition Co., Inc. Telephone (910) 897-5501
Mechanical Contractor's Company Name
724 Turlington Road, Dunn, NC 28334 Email Address _____
Address
[Signature] License # L. 17164
Signature of Owner/Contractor/Officer(s) of Corporation

Plumbing Contractor Information: Plumbing Cost \$ 45,000.00
Description of Work installation of plumbing system # Baths 2
Herrig Plumbing, LLC Telephone (910) 514-7807
Plumbing Contractor's Company Name
1080 Reedy Pony Church Rd., Newton Grove, NC Email Address _____
Address
[Signature] License # 36262
Signature of Owner/Contractor/Officer(s) of Corporation

Insulation Contractor Information
Insulators Inc. - Sanford, NC - Sandy Clark Telephone (919) 470-1974
Insulation Contractor's Company Name & Address

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

Sprinkler Contractor Information	
Sprinkler Contractor's Company Name	N/A
Address	
Signature of Officer(s) of Corporation	
Fire Alarm Contractor Information	
Fire Alarm Contractor's Company Name	N/A
Address	
Signature of Officer(s) of Corporation	
Driveway Access - NC Department of Transportation Driveway Access/Permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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: [Signature] Date: 8/21/2024

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: Barefoot Building Company, LLC

Sign w/Title: [Signature], Member Manager Date: 8/21/2024