

*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 # BCOM-2405-0005

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: Aiken & Charlotte Keppler Date: 11-26-24

Site Address: 316 Moulton Springs Road Erwin NC Phone: _____

Directions to job site from Lillington: 421 South - TR on Hwy 217 - TR 1000' Past Carlie Cs onto Moulton Springs Road. Project on Left

Subdivision: _____ Lot: _____

Description of Proposed Work: Mini Storage

Heated SF _____ Unheated SF _____

General Contractor Information: Building Cost \$ \$9000

Whittenton Builders Enterprise
Building Contractor's Company Name
863 Neighbors Road Dunn NC
Address

919-427-8465
Telephone
todd@whittentonbuilders.com
Email Address

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

48607
License #

Electrical Contractor Information: Electrical Cost \$ \$12000

Description of Work _____ Service Size: _____ Amps #T-Poles _____

The Electriq Company
Electrical Contractor's Company Name
34 Jared Drive, Angier NC
Address

984-225-9884
Telephone
Email Address

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

134492
License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

Mechanical Contractor's Company Name
Address

Telephone
Email Address

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

License #

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name
Address

Telephone
Email Address

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

License #

Insulation Contractor Information

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

11-26-24
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: Whittenton Builders Enterprise

Sign w/Title: Todd Whittle - PRESIDENT Date: 11-26-24