

COMMERCIAL BUILDING APPLICATION

Site Address: 1971 Oakridge River Road, Fuquay-Varina, NC 27601 **PIN:** 0634-54-0565

Owner: County of Harnett **Phone:** 910-893-7555 **Email:** btrout@harnett.org

Description of Proposed Work: Solid waste container site with attendant shelter **Total Job Cost:** \$ 1,666,806.00

GENERAL CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Harrod and Assoc. Constructors, Inc.	919-828-7782
General Contractor's Company Name	Phone
6612 Fleetwood Drive	cbrooks@harrodandassoc.com
Address	Email
32791	\$ 120,000.00
License #	Signature of Owner/Contractor/Officer of Corp.
	Building Cost (excluding trades)

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: _____ Service Size: _____ Amps T-Poles: YES ☐ NO ☐

Electrical Contractor's Company Name	Phone
Address	Email
License #	Signature of Owner/Contractor/Officer of Corp.
	\$198,439.07
	Electrical Cost

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: N/A # of Units: _____

Mechanical Contractor's Company Name	Phone
Address	Email
License #	Signature of Owner/Contractor/Officer of Corp.
	\$ _____
	Mechanical Cost

PLUMBING CONTRACTOR INFORMATION

Description of Work: N/A # of Baths: _____

Plumbing Contractor's Company Name	Phone
Address	Email
License #	Signature of Owner/Contractor/Officer of Corp.
	\$ _____
	Plumbing Cost

INSULATION CONTRACTOR INFORMATION

N/A

Insulation Contractor's Company Name	Phone
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APPLICATION CONTINUES ON BACK



SPRINKLER CONTRACTOR INFORMATION

N/A

Sprinkler Contractor's Company Name

Phone

Address

Email

License #

Signature of Owner/Contractor/Officer of Corp.

FIRE ALARM CONTRACTOR INFORMATION

N/A

Fire Alarm Contractor's Company Name

Phone

Address

Email

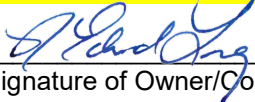
License #

Signature of Owner/Contractor/Officer of Corp.

Driveway Access - NC Department of Transportation Driveway Access/Permit? YES ☒ NO ☐

I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.


Signature of Owner/Contractor/Officer of Corp.

10/22/2025
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

 X General Contractor Owner Officer/Agent of the Contractor or Owner

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

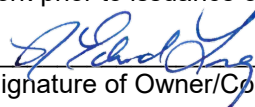
 X Has 3 or more employees and has obtained workers' compensation insurance to cover them,

 Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

 Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

 Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.


Signature of Owner/Contractor/Officer of Corp.

10/22/2025
Date

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: Electrical Service

Service Size: 400 Amps T-Poles: YES ☐ NO ☒

Home Run Electrical Services LLC

901-299-1844

Electrical Contractor's Company Name

Phone

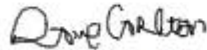
5005 Swift Ridge Rd Raleigh NC 27606

office.homerunelectrical@gmail.com

Address

Email

u.35303



\$ 198439.07

License #

Signature of Owner/Contractor/Officer of Corp.

Electrical Cost