

*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.

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: Paris Potter Management Corp. Date: 4/26/22

Site Address: 1512 NC 24-87 Cameron, NC 28326 Phone: (910) 527-3894

Directions to job site from Lillington: get onto 87 from Manchester and go right. Head towards Sanford and the KFC will be on your right.

Subdivision: _____ Lot: _____

Description of Proposed Work: Upgrade fire suppression system in hood

Heated SF _____ Unheated SF _____ Building Cost \$ 7580

General Contractor Information: Building Contractor's Company Name _____ Telephone (910) 486-6270

Address 1048 Bragg blvd Fayetteville, NC 28301 Email Address justin@firepro.biz

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # SP.FA/LV. 34223

Electrical Contractor Information: Electrical Cost \$ _____ Service Size: _____ Amps #T-Poles _____

Description of Work none

Electrical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Mechanical Contractor Information: Mechanical Cost \$ _____ # Units _____

Description of Work none

Mechanical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Plumbing Contractor Information: Plumbing Cost \$ _____ # Baths _____

Description of Work none

Plumbing Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address none 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 Protection
Fire Alarm Contractor's Company Name _____

(910) 486-6270
Telephone _____

1048 Bragg Blvd Fayetteville, NC 28301
Address _____

justin@firepro.biz
Email Address _____

[Signature]
Signature of Officer(s) of Corporation _____

R.F.A/L.V. 34223
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]
Signature of Owner/Contractor/Officer(s) of Corporation _____

4/26/22
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: Fire Protection

Sign w/Title: [Signature] Justin Adams Service manager Date: 4/26/22