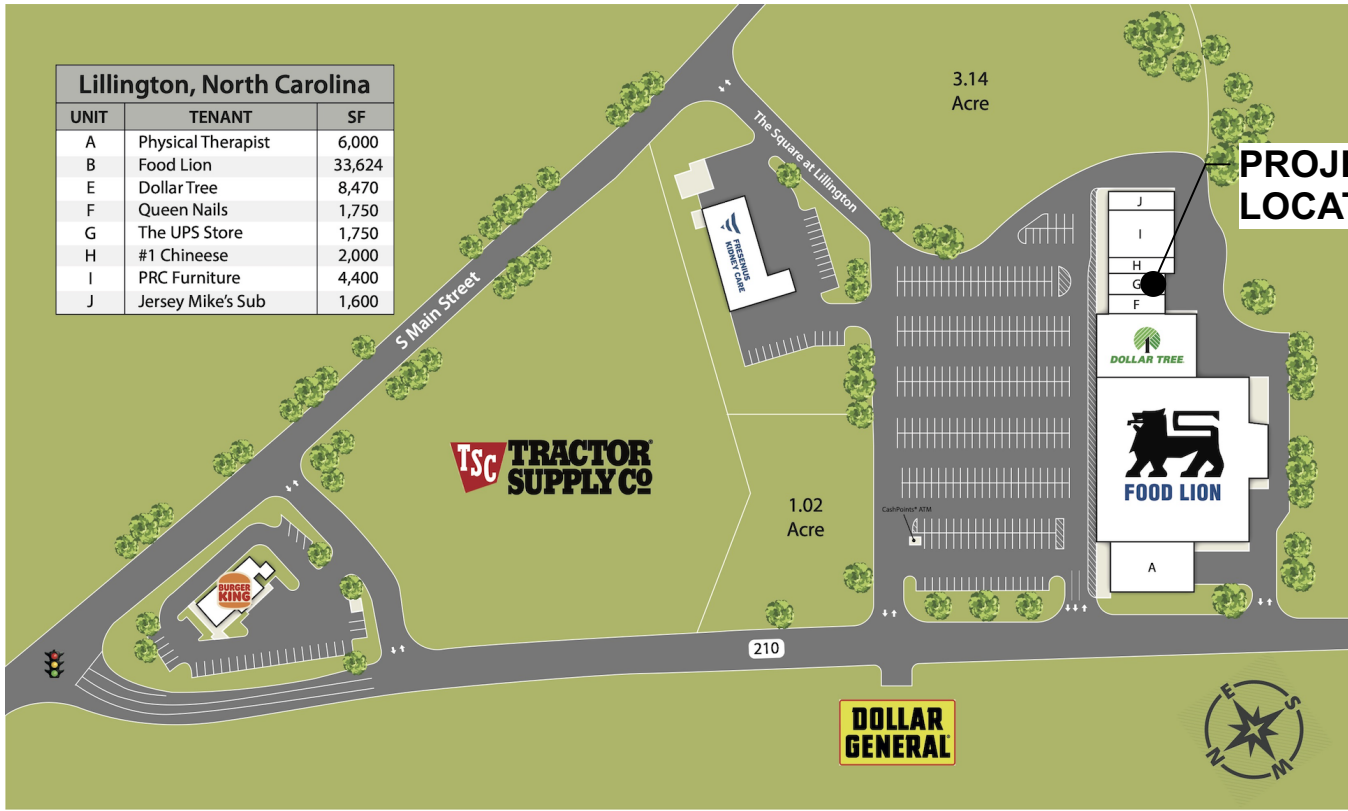
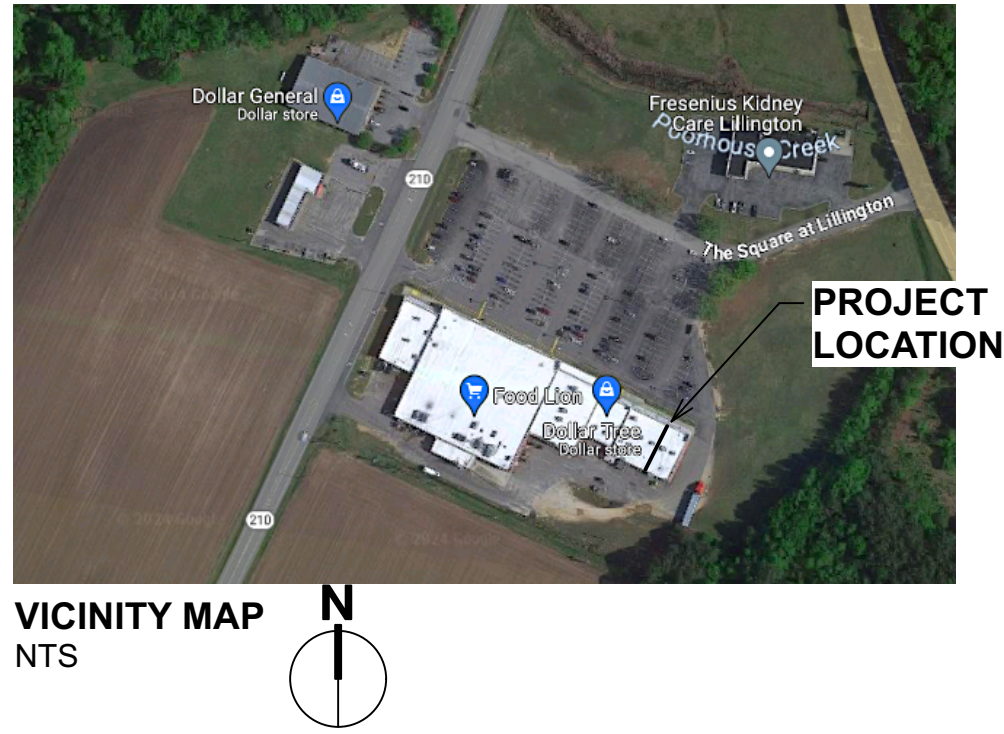


UPS Store Upfit
THE SQUARE AT
LILLINGTON
NC HIGHWAY 210
LILLINGTON, NC 27546

PROJECT SCOPE:
- CONVERT A CHINESE RESTAURANT DINING ROOM INTO A UPS STORE
- FILL IN THE OPENING BETWEEN THE CHINESE TAKEOUT AND NEW UPS STORE
- COMBINE THE TWO EXISTING RESTROOMS INTO ONE ADA COMPLIANT RESTROOM



SITE PLAN
NTS

2018 APPENDIX B
BUILDING CODE SUMMARY
FOR ALL COMMERCIAL PROJECTS
(EXCEPT 1 AND 2-FAMILY DWELLINGS AND TOWNHOUSES)
(Reproduce the following data on the building plans sheet 1 or 2)

Name of Project: UPS Store Upfit, The Square at Lillington
Address: NC Highway 210, Lillington, NC Zip Code: 27546
Proposed Use: Business
Owner/Authorized Agent: Sam Latham Phone # (910) 512-8680 E-Mail sam@swainassociates.com
Owned By: ☐ City/County ☒ Private ☐ State
Code Enforcement Jurisdiction: ☐ City ☒ County Harnett ☐ State

CONTACT: Matthew W. Williard, AIA

DESIGNER	FIRM	NAME	LICENSE #	TELEPHONE	EMAIL
Architectural	M.W. Williard, Architect, PLLC	Matthew W. Williard, AIA	10180	(910) 297-3665	mwilliard@icloud.com
Civil					
Electrical					
Fire Alarm					
Plumbing					
Mechanical					
Sprinkler-Standpipe					
Structural					
Retaining Walls >5' High					
Other					

2018 NC BUILDING CODE: ☐ New Construction ☐ Addition ☒ Renovation
☐ 1st Time Interior Completion
☐ Shell/Core
☐ Phase Construction - Shell/Core
☐ Renovation

2018 NC EXISTING BUILDING CODE: ☐ Prescriptive ☐ Repair ☐ Chapter 14
Alteration: ☐ Level 1 ☐ Level 2 ☐ Level 3
☐ Historic Property ☒ Change of Use

CONSTRUCTED: (date) 1988 ORIGINAL OCCUPANCY(S) (Ch. 3): A-2

RENOVATED: (date) NA PROPOSED OCCUPANCY(S) (Ch. 3): A-2/Business (Future)

RISK CATEGORY (Table 1604.5): Current: ☐ I ☒ II ☐ III ☐ IV
Proposed: ☐ I ☒ II ☐ III ☐ IV

BASIC BUILDING DATA

Construction Type: ☐ I-A ☐ II-A ☐ III-A ☐ IV-A ☐ V-A
☐ I-B ☒ II-B ☐ III-B ☐ IV-B ☐ V-B

Sprinklers: ☒ No ☐ Partial ☐ Yes NFPA 13 ☐ NFPA 13R ☐ NFPA 13D

Standpipes: ☒ No ☐ Yes Class ☐ I ☐ II ☐ III ☐ Wet ☐ Dry

Fire District: ☒ No ☐ Yes (Primary) Flood Hazard Area: ☒ No ☐ Yes

Special Inspections Required: ☒ No ☐ Yes

Gross Building Area			
FLOOR	EXISTING (SQ. FT.)	NEW (SQ. FT.)	SUB-TOTAL
6th Floor			
5th Floor			
4th Floor			
3rd Floor			
2nd Floor			
Mezzanine			
1st Floor	65,194	1,663	65,194
Basement			
TOTAL			

TENANT UPFIT (AREA OF WORK)

ALLOWABLE AREA

Primary Occupancy Classification(s):
Assembly ☐ I-A ☐ II-A ☒ III-A ☐ IV-A ☐ V-A
Business ☒ UPFIT
Educational ☐ F-1 Moderate ☐ F-2 Low
Factory ☐ H-1 Detonate ☐ H-2 Deflagrate ☐ H-3 Combust ☐ H-4 Health ☐ H-5 HPM
Hazardous ☐ I-1 Condition ☐ 1 ☐ 2
Institutional ☐ I-2 Condition ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
☐ I-3 Condition ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
☐ I-4
Mercantile ☒ R-1 ☐ R-2 ☐ R-3 ☐ R-4
Residential ☐ S-1 Moderate ☐ S-2 Low ☐ High-piled
Storage ☐ Parking Garage ☐ Open ☐ Enclosed ☐ Repair Garage
Utility and Miscellaneous ☐

Accessory Occupancy Classification(s):
Incidental Uses (Table 509):
Special Uses (Chapter 4 - List Code Selections):
Special Provisions (Chapter 5 - List Code Selections):
Mixed Occupancy: ☐ No ☐ Yes Separation: Hr. Exception:

☐ Non-Separated Use (508.3)
The required type of construction for the building shall be determined by applying the height and area limitations for each of the applicable occupancies to the entire building. The most restrictive type of construction, so determined, shall apply to the entire building.
☒ Separated Use (508.4)
See below for area calculations for each story, the area of the occupancy shall be such that the sum of the ratios of the actual floor area of each use divided by the allowable floor area for each use shall not exceed 1.

LIFE SAFETY SYSTEM REQUIREMENTS

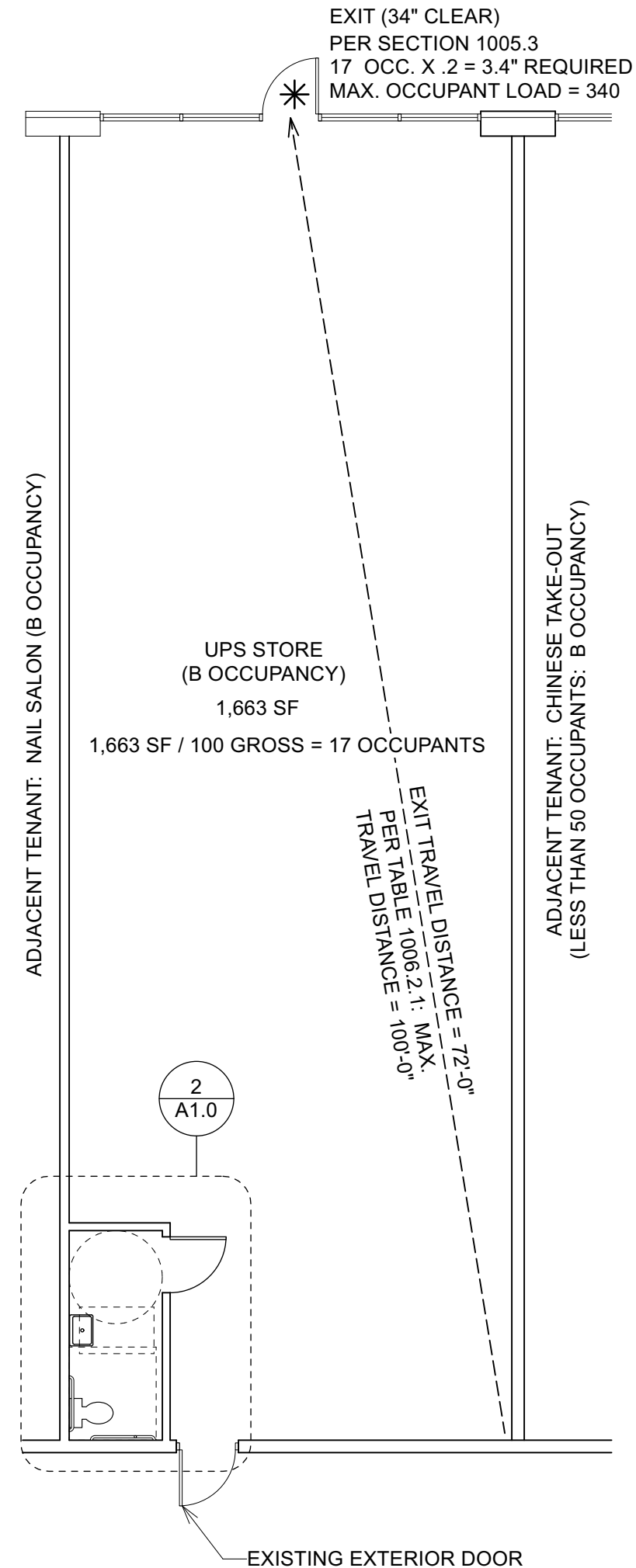
Emergency Lighting: ☐ No ☒ Yes
Exit Signs: ☐ No ☒ Yes
Fire Alarm: ☒ No ☐ Yes
Smoke Detection Systems: ☒ No ☐ Yes ☐ Partial
Carbon Monoxide Detection: ☒ No ☐ Yes

LIFE SAFETY PLAN REQUIREMENTS

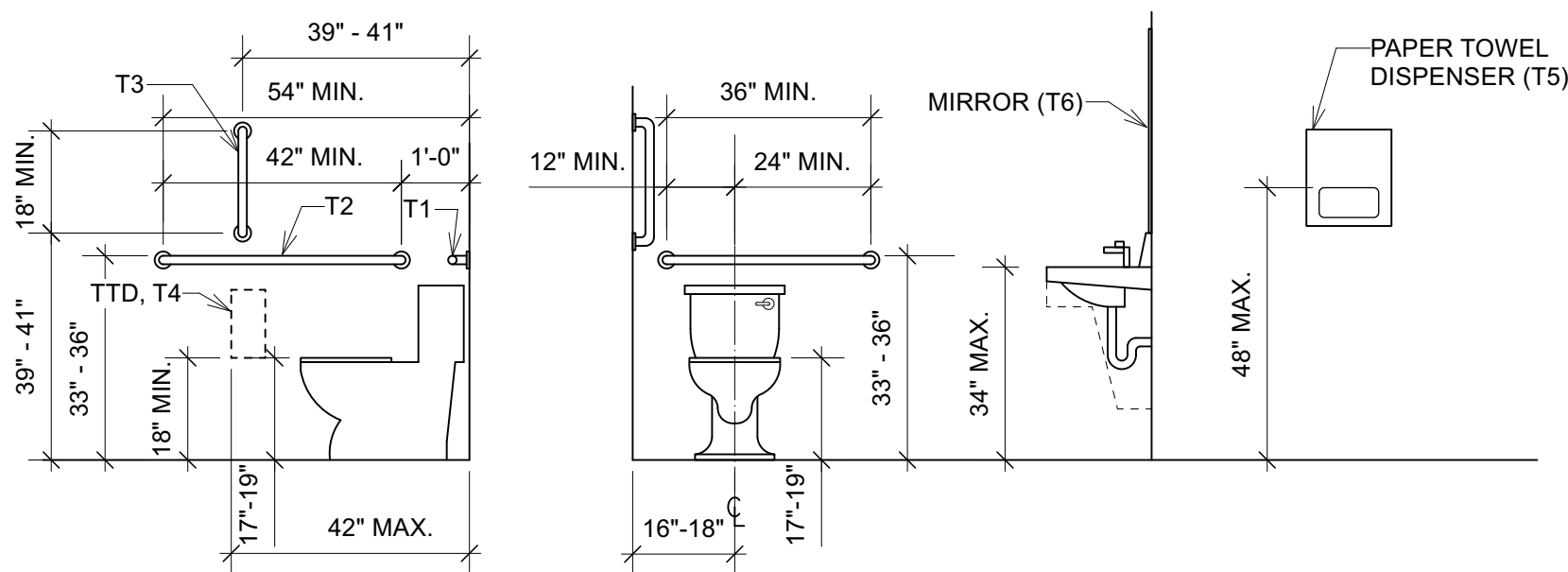
☒ Life Safety Plan Sheet #: 1/A1.0
☐ Fire and/or smoke rated wall locations (Chapter 7)
☐ Assumed and real property line locations (if not on the site plan)
☐ Exterior wall opening area with respect to distance to assumed property lines (705.8)
☒ Occupancy Use for each area as it relates to occupant load calculation (Table 1004.1.2)
☒ Occupant loads for each area
☒ Exit access travel distances (1017)
☐ Common path of travel distances (1006.2.1 & 1006.3.2(1))
☐ Dead end lengths (1020.4)
☒ Clear exit widths for each exit door
☒ Maximum calculated occupant load capacity each exit door can accommodate based on egress width (1005.3)
☒ Actual occupant load for each exit door
☐ A separate schematic plan indicating where fire rated floor/ceiling and/or roof structure is provided for purposes of occupancy separation
☐ Location of doors with panic hardware (1010.1.10)
☐ Location of doors with delayed egress locks and the amount of delay (1010.1.9.7)
☐ Location of doors with electromagnetic egress locks (1010.1.9.9)
☐ Location of doors equipped with hold-open devices
☐ Location of emergency escape windows (1030)
☐ The square footage of each fire area (202)
☐ The square footage of each smoke compartment for Occupancy Classification I-2(407.5)
☐ Note any code exceptions or table notes that may have been utilized regarding the items above

PLUMBING FIXTURE REQUIREMENTS
(TABLE 2902.1) - FOR UPFIT ONLY

USE	SPACE	EXISTING	WATERCLOSETS			URINALS		LAVATORIES		SHOWERS/ TUBS	DRINKING FOUNTAINS	
			MALE	FEMALE	UNISEX	MALE	FEMALE	MALE	FEMALE		REGULAR	ACCESSIBLE
		NEW			1					1		
		REQUIRED			1					1		



1 LIFE SAFETY PLAN
A1.0 1/8" = 1'-0"



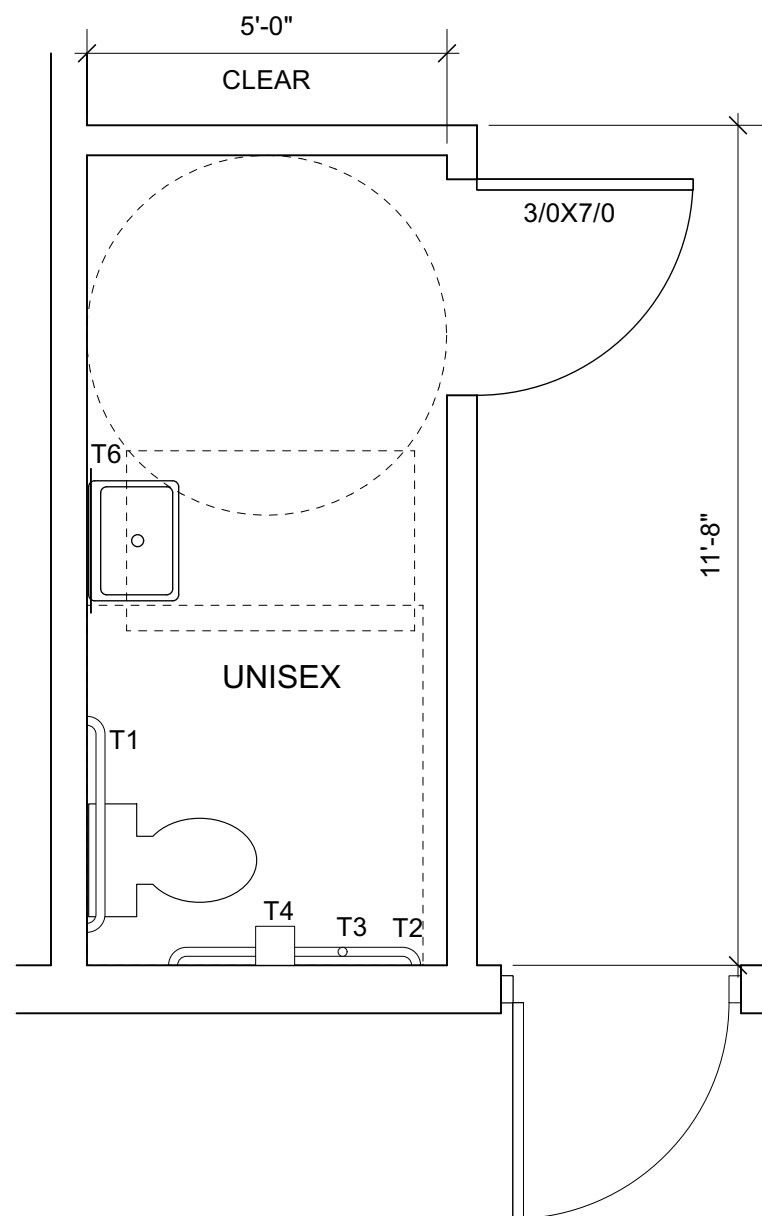
3 ADA MOUNTING HTS.
A1.0 3/8" = 1'-0"

Reviewed for Fire Code Compliance



Roger Sullivan

10/23/2025 11:30:52 AM



2 ENLARGED RESTROOM PLAN
A1.0 3/8" = 1'-0"

TOILET ACCESSORY SCHEDULE

T1	GRAB BAR - 36"	
T2	GRAB BAR - 42"	
T3	GRAB BAR - 18"	
T4	TOILET TISSUE DISPENSER	
T5	PAPER TOWEL DISPENSOR	
T6	PLATE MIRROR	

NOTE:
1. Mounting heights are to the operating mechanisms where applicable.
2. Provide wood blocking for toilet partitions, grab bars, mirrors, and any other applicable toilet accessories in walls where gypsum wallboard is removed.



Design Firm
M.W. Williard, Architect, PLLC
P.O. Box 7224, Wilmington, NC 28406
(910) 297-3665
mwilliard@icloud.com

Project Title
**UPS Store Upfit
The Square at Lillington
NC Highway 210
Lillington, NC 27546**

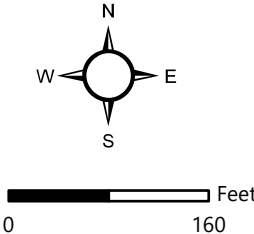
Sheet Title
Appendix B, Floor Plan, Details

Drawn By
MWW
Reviewed By
MWW
Date
10/15/25
CAD File Name
UPS Store

Scale
Scale: Varies
Sheet No.
A1.0



- | | |
|------------------|---------|
| County Boundary | NC |
| City Limits | US |
| Address Numbers | Parcels |
| Road Centerlines | |





Fire Marshal Division

P.O. Box 370
Lillington, NC 27546
910-893-7580

Application for Plan Review

Permit Type: _____

Date Received: _____ Received By: _____

Name of Project: **Square at Lillington, UPS Upfit**

Physical Address of Project: **NO 1 Chinese 20 THE SQUARE AT LILLINGTON**

Plans Submitted By: _____

Project Phone: (____)-____-____

Contact Person/Address: **Tommy McLeod**

Contact Phone: **(910)-890-3979** (____)-____-____

Contractor's Name/Info: **STE General Contractors, LLC**

Tommy McLeod

Contractor's Phone: **(910)-890-3979**

Contact Email: **stegc.tommy@gmail.com**

- **Plans that are submitted will be reviewed as quickly as possible with an average time of review between 7-10 working days.**
- **Status checks may be conducted on plan reviews by visiting the website <http://hteweb.harnett.org/Click2GovBP/Index.jsp> or by calling the Harnett County Central Permitting Office (910-893-7525 : Opt. 2), or the Harnett County Fire Marshal's Office (910-893-7580).**
- **Approved plans must be picked up from the Central Permitting Office and all fees paid before any required inspections can be conducted.**



TOWN OF LILLINGTON TRADE PERMIT APPLICATION

Planning & Inspections Department
106 West Front Street, PO Box 296 Lillington NC 27546
• phone 910-893-0311 • fax 910-893-3693
lillingtonnc.org

Check all that apply: ☐ Residential ☒ Non-Residential

Owner Information: Name Square at Lillington LLC Phone _____
Home Street Address 1131-B Military Cutoff Rd City Wilmington State NC Zip 28405

Site Location Information (if different from Owner's Home Address):
Address The Square at Lillington City Lillington State NC Zip 27546

ELECTRICAL CONTRACTOR:

Authorized Contractor's Name J.M. Hope Electric LLC *N.C. State License # 21326L
General Contractor's Signature Thomas W. McLeod Phone 919-776-5144 Fax _____
Street Address 409 Chatham St. City Sanford State NC Zip 27330

____ Electrical Only - Description Demo 12 Recept Add 12 Recept change Light Fixtures _____ HVAC Installation or Change-Out (Mech & Elec Contractor)

MECHANICAL CONTRACTOR:

Authorized Contractor's Name J+M Heating & Air, Inc. *N.C. State License # L17104
General Contractor's Signature Thomas W. McLeod Phone 910-897-5501 Fax _____
Street Address 724 Turlington Rd City Dunn State NC Zip 28334

____ HVAC Installation or Change-Out (Mech & Elec Contractor) _____ Other - Description move ductwork around minimum

PLUMBING CONTRACTOR

Authorized Contractor's Name MLS Plumbing Company, Inc. *N.C. State License # NC 28833PI
General Contractor's Signature Thomas W. McLeod Phone 910-818-4122 Fax _____
Street Address 784 Gentry Rd City Erwin State NC Zip 28339

____ Plumbing Only - Description Rework Bath to Make H/C

BUILDING CONTRACTOR:

Authorized Contractor's Name STE General Contractors, LLC *N.C. State License # 78246
General Contractor's Signature Thomas W. McLeod Phone 910-890-3979 Fax _____
Street Address 100 Tilghman Dr City Dunn State NC Zip 28334

47800 Building Only - Description Demo Floor, existing Bathroom, one storage room Build new Bath

COST OF LABOR / MATERIALS: Electrical \$ 18,400. Mechanical \$ 5600. Plumbing \$ 9600 Total \$ 33,600

Please Contact Thomas McLeod 910-890-3979 when permit is ready.
(Name) (Phone number)

Applicant Name - Print - Thomas McLeod Signature Thomas W. McLeod Date 9/26/2025

FOR OFFICE USE:

BUILDING PERMIT ID: _____

Trade Permit Approval Given By: _____ Date: _____



TOWN OF LILLINGTON NON-RESIDENTIAL CONSTRUCTION APPLICATION

Planning & Inspections Department
102 East Front Street, PO Box 296 Lillington NC 27546
• phone 910-893-0311 • fax 910-893-3693
lillingtonnc.org

PLEASE NOTE:

1. Five sets of construction plans;
2. Three sets of site plans with setbacks;
3. All application items and signatures must be complete;
4. Permit costs based on construction costs.

Owner Information: Name Square at Lillington LLC Phone _____
Home Street Address 1131-B Military Cutoff Rd City Wilmington State NC Zip 28405
Lot Number _____ Subdivision _____ Phase _____

Site Location Information (if different from Owner's Home Address):

Address The Square at Lillington City Lillington State NC Zip 27546
Lot Number _____ Subdivision _____ Phase _____

General Contractor:

Name - Please Print STE General Contractors LLC
*N.C. State License # 78246 Expiration of Workers Compensation Insurance 7/12/2026
Phone 910-890-3979 Fax _____ Email stege.tommy@gmail.com
Street Address 100 Trilghman City Dunn State NC Zip 28334
General Contractor's Signature Thomas W. McLeod Contact Person Thomas McLeod

Electrical Company:

Company Name - Please Print J.M. Pope Electric LLC
*N.C. State License # 213266 Authorized Contractor's Name (print legibly) Marshall Pope
Phone 919-776-5144 Fax _____ Email marshallpope74@gmail.com
Street Address 409 Chatham St City Danford State NC Zip 27330
Authorized Contractor's Signature Thomas W. McLeod

Mechanical Company:

Company Name - Please Print J+m Heating + Air, Inc.
*N.C. State License # L17164 Authorized Contractor's Name (print legibly) _____
Phone 910-897-5501 Fax _____ Email jandmhvac@centurylink.net
Street Address 724 Turlington Rd City Dunn State NC Zip 28334
Authorized Contractor's Signature Thomas W. McLeod

Plumbing Company:

Company Name - Please Print MLS Plumbing Company, Inc.
*N.C. State License # NC 28833P1 Authorized Contractor's Name (print legibly) Michael Smith
Phone 910-818-4122 Fax _____ Email mlsplumbing@hotmail.com
Street Address 784 Gentry Rd City Erwin State NC Zip 28339
Authorized Contractor's Signature Thomas W. McLeod

*State license number must match name of company.

Cost of work being performed:

Electrical: \$ 18,400
Mechanical: \$ 5,600
Plumbing: \$ 9,600
Building: \$ 47,800
TOTAL: 81,400

CHARACTERISTICS OF BUILDING (Please check all that apply):

☐ New Building	☐ Alteration	☐ Addition	☒ Fit Up
☐ Repair	☐ Monument Sign	☐ Retaining Wall	☐ Sales Trailer
☐ Construction Trailer	☐ Multi-Family	☐ Hotel/Motel	☐ Temporary
☐ Other : _____			

TYPE OF SEWER:

☒ Public
☐ Private

TYPE OF FRAME:

☐ Wood ☐ Masonry ☐ Concrete
☒ Structural Steel

TYPE OF FOUNDATION:

☐ Crawl Space
☐ Basement
☐ Slab

NUMBER OF FLOORS PER BUILDING: _____**TOTAL SQ. FT. OF EACH FLOOR:** _____**TYPE OF USE:**

☐ MANUFACTURING	☐ STORAGE	☐ OFFICE
☐ FLOOR SPACE	☐ WAREHOUSE	☐ RESTAURANT
☐ PUBLIC USE	☐ SCHOOL	☐ RECREATIONAL

_____ # EMPLOYEES OVER 8 HOURS SHIFT TO WORK

_____ # EMPLOYEES PER SHIFT

_____ # OCCASIONAL EMPLOYEES

_____ # RESTAURANT SEATS

Please Contact Thomas McLeod 910-890-3979 when permit is ready.

(Name)

(Phone number)

Applicant Name – Print – Thomas McLeod

Applicant Signature Thomas W. McLeod Date 9/26/2025

Inspection Signature _____ Date _____

Square at Lillingston, UPS UPS-4

