



*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
PO Box 85 Lillington, NC 27648
910-893-7525 Fax 910-893-2793 www.harnett.org/permits
COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Boddle Noell Enterprises Date: 5-20-20
Site Address: Hwy 87 & Buffalo Lake Rd Cameron, NC 28328 Phone: 910-690-3701
Description of Proposed Work: New Construction-Hardee's Restaurant

General Contractor Information: Building Cost \$ 877,550.00

R & L Builders & Sons, LLC Telephone 252-443-1554
Building Contractor's Company Name
5189 Banhill Farm Rd Battleboro, NC 27809
Address: _____ Telephone
Ricky C. Banhill Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #
_____ 53728

Electrical Contractor Information: Electrical Cost \$ 70,000

Description of Work new electric install Service Size: 800 Amps #T-Poles 1
Willie Electric Commany Telephone 252-745-3501
Electrical Contractor's Company Name
PO Box 67 Bayboro, NC 28515
Address: _____ Telephone
Willie Miller Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #
_____ 3688U

Mechanical Contractor Information: Mechanical Cost \$ 50,000

Description of Work 3HP's, 3hoods, 1bath fan # Units 3
Shearin Heating & Cooling 1 make up air unit Telephone 252-937-4704
Mechanical Contractor's Company Name
1242 Construction Drive Rocky Mount, NC 27804
Address: _____ Telephone
Steven A. Shear Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #
_____ 9831

Plumbing Contractor Information: Plumbing Cost \$ 50,000

Description of Work new plumbing # Baths 2 restrooms
Jeromy C Wood Plumbing Co Telephone 252-904-2108
Plumbing Contractor's Company Name
8793 Seven Paths Rd Spring Hope, NC 27882
Address: _____ Telephone
Jeromy C Wood Email Address
Signature of Owner/Contractor/Officer(s) of Corporation License #
_____ 22654

Insulation Contractor Information

Weaver Insulation PO Box 602 Sharpsburg, NC 27878 Telephone 252-443-7621
Insulation Contractor's Company Name & Address
_____ Telephone

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

Sprinkler Contractor Information

n/a

Sprinkler Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Fire Alarm Contractor Information

n/a

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 _____

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.

Sign w/Title: *Ricky C. Parrish*

Date: 5-20-20