'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 # BCOMZ110 · 0007

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-593-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit	
Owner's Name: Crete Solutions, LLC	Date:
Site Address: 2520 US 401 N Lillington, NC 27546	Phone: 910-386-7967
Description of Proposed Work: Concrete Batch Office	
Consent Contractor Information: Building Cost 5 150.000	
HIGHLAND PAVING CO. LLC.	910.485-5790 \OB
Building Contractor's Company Name	
P.O. BOX 1843 FATETRVILLENC 28302	dbyrdehighlandpavins.com
Agdress / /	Email Address
WAR S	55505
Signature of Owner/Contractor/Officer(s) of Corporation	License # SPACE SCO
Description of Work Warrant Service Size: 200	Amps #T-Poles
THE CONTRACT OF THE CONTRACT O	
Electrical Contractor's Company Name	910-259-5720 Telephone
PO Box 228 War a N.C. 28466	
Address	Email Address
Las Lane	11921-6
	1:
Mechanical Contractor Information: Mechanical Co	st \$ 0,000.—
Description of Work Install of HVAC and duct work	# Units
	(910) 328-1817 n
Mechanical Contractor's Company Name	Telephone
Grdson Heatrns & Am INC	ad@gideowhVAc.com
Address	Email Address
> DiDule	16039
Signature of Owner/Contractor/Office(s) of Corporation	License #
Plumbing Contractor Information: Plumbing Cost \$	
Description of Work General plumbing of building	# Baths
MLS PLUMBING CO. INC	910 - 484 - 1124 P
Plumbing Contractor's Company Name	Telephone
P.O. BOX 547 STEPMANNE 28391	MLS PLUMBING & MOTMAIL.COM Email Address
Address Mich St	Ann 300022 PA
	NC 28833P1
Signature of Owner/Contractor/Officer(s) of Corporation	Cranse #
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	Telephone



Sprinkler Contractor In	nformation
N/A	N/A
Sprinkler Contractor's Company Name	Telephone
N/A	N/A
Address	Email Address
CARLOUR OFF	N/A
Signature of Officer(s) of Corporation	License #
Fire Alarm Contractor I	nformation
N/A	N/A
Fire Alarm Contractor's Company Name	Telephone
N/A	N/A
Address	Email Address
	N/A
Signature of Officer(s) of Corporation	License #
<u>Driveway Access</u> - NC Department of Transportation Dr	riveway Access/Permit? Yes No
Mechanical codes, and the Harnett County Zoning Ordinance contractors is correct as known to me and if any changes occumber of bedrooms, building and trade plans, Environmental changes, I certify it is my responsibility to notify the Harnett Cany and all changes. Expired Permit Fees - 6 months to 2 years permit re-issue for is charged at full price per current fee schedule.	cur including listed contractors, site plan, I Health permit changes or proposed use County Central Permitting Department of ee is \$150.00. After 2 years re-issue fee
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:	
	cer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person(s set forth in the permit:	s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained wor	rkers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtaine them.	d workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their ov covering themselves.	wn policy of workers' compensation insurance
Has no more than two (2) employees and no subcontra	actors.
While working on the project for which this permit is sought it is Department issuing the permit may require certificates of cove to issuance of the permit and at any time during the permitted carrying out the work.	erage of worker's compensation insurance prior
Sign w/Title: finny farset	Date: 10.26.21