

*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 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Starbucks Corporation	Date:
Site Address: 2822 NC-24	Phone: 404-991-9837
Description of Proposed Work: Tenant Interior Upfit for New Starbucks	
General Contractor Information: Building Cost \$ 259,436.00	
R.A. Heath Construction LLC	770-271-8229
Building Contractor's Company Name	Telephone
2145 Winder Hwy, Dacula, GA 30019	info@raheath.com
Address DocuSigned by:	Email Address
Ron Heath	63263
Signature of WWW.Confirence Signature of Www.Confirence Signature of Www.Confirence Signature of Wartence Sign	
Description of Work Interior electrical distribution Service Size: 400	Amps #T-Poles <u>n/a</u>
South Cross Electric	980-621-1009 Telephone
Electrical Contractor's Company Name 122 Piedmont Dr, Kannapolis, NC 28081	Telephone
Address Docusigned by:	chriswyrick@southcrosselectric.net Email Address
Clinis Wyrick	31413-U
Signature of @wner/তেপাtractor/Officer(s) of Corporation <u>Mechanical Contractor Information:</u> Mechanical Co	License # ost \$ <u>58,750.00</u>
Description of Work Interior duct/diffuser/controls	# Units ²
U.S. Mechanical Contractors Inc.	706-654-5654
Mechanical Contractor's Company Name	Telephone
237 Amy Industrial Lane, Hoschton, GA30548	cliffbrown@mindspring.com
Address DocuSigned by:	Email Address
(Ann	29606
Signature of @wner/@entractor/Officer(s) of Corporation Plumbing Contractor Information: Plumbing Cost \$	
Description of Work Interior underground/water heater/lavatory and fixt	ures # Baths_2
Vance Plumbing Service	252-213-7398
Plumbing Contractor's Company Name	Telephone
101 Willow Oak Place, Henderson, NC 27537	vanceplumb@yahoo.com
Address DocuSigned by:	Email Address
Robert Pulliam	19736
Signature of @WFT@F/P@GFRFactor/Officer(s) of Corporation	License #
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	Telephone
modiation contractors company maine & Address	i cicpi ione

*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 #	
<u>Driveway Access</u> - 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.		
Kon Heath	5/5/2022	
Sigh ature জিঞ্জেন্ডা/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: Ron Heath	Date: <u>5/5/2022</u>	
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