

\*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  
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: Tortilleria Leon, Grocery & more Inc Date: 3/7/25  
Site Address: 105 E H St. Erwin, NC 28339 Phone: 910-292-0134  
Directions to job site from Lillington: Downtown Erwin

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Proposed Work: Installing new equipment

Heated SF ✓ Unheated SF \_\_\_\_\_

**General Contractor Information:** Building Cost \$ \_\_\_\_\_

Building Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

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

**Electrical Contractor Information:** Electrical Cost \$ \$ 3,800.00

Description of Work Dedicated 240V for new equipment Service Size: 400 Amps #T-Poles \_\_\_\_\_

SNO Electric Telephone 919 427 6952 - 919 414 7173

Electrical Contractor's Company Name \_\_\_\_\_  
19655 NC 210 Angier NC 27501 Email Address ldyong@gmail.com

Address Nelson Owen License # 13075-L

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

**Mechanical Contractor Information:** Mechanical Cost \$ 6,800

Description of Work Cancel exhaust pipe, connect 2 gas Appliances # Units \_\_\_\_\_

General Solutions LLC Telephone 919-721-3966

Mechanical Contractor's Company Name \_\_\_\_\_  
150 Edna Ln Lillington NC 27546 Email Address GeneralSolutionsLLC23@gmail.com

Address [Signature] License # 37094

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

**Plumbing Contractor Information:** Plumbing Cost \$ \_\_\_\_\_

Description of Work \_\_\_\_\_ # Baths \_\_\_\_\_

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 \_\_\_\_\_ Telephone \_\_\_\_\_

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