*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: Hut Carolina, LLC / Flynn Group Date: 05/06/2025

Site Address: 185 Mittie Haddock Dr., Cameron, NC 28326 Phone: 336-287-7705

Directions to job site from Lillington: Head south on McKinney Pkwy toward Alexander Dr; Take NC-210 S, Overhills Rd and NC-24 W/NC-87 N to H M Cagle Dr in Spout Springs; Continue on H M Cagle Dr. Drive to Mittie Haddock Dr

Subdivision: None; Parcel # 9585-60-1624.000; Tract #039568 0094 06 Lot: None

Description of Proposed Work: Remodel former therapy space into new Pizza Hut

Heated SF 1,600 Unheated SF 0

General Contractor Information: Building Cost $ 443,352.76

DunRite, Inc. — Building Contractor's Company Name
757-337-0267 office — Telephone
714 Fenway Ave., Chesapeake, VA 23323 — Address
matt@dunriteus.com / beverly@dunriteus.com — Email Address
Matthew Kelly, PM — Signature of Owner/Contractor/Officer(s) of Corporation
74845 - Copy Attached — License #

Electrical Contractor Information: Electrical Cost $ 28,500.00

Description of Work Wiring per plans / specs Service Size: _____ Amps #T-Poles ____

J. M. Pope Electric, LLC — Electrical Contractor's Company Name
919-776-5144 — Telephone
409 Chatham St., Sanford, NC 27330-4802 — Address
marshallpope74@gmail.com / dmfrazer74@gmail.com — Email Address
James Marshall Pope — Signature of Owner/Contractor/Officer(s) of Corporation
21326 — License #

Mechanical Contractor Information: Mechanical Cost $ $74,500.00

Description of Work HVAC Installation # Units 2

Gaston HVAC, Inc. — Mechanical Contractor's Company Name
828-817-6026 — Telephone
1845 Smith Waldrop Rd., Mill Spring, NC 28756 — Address
gastonhvacinc@gmail.com — Email Address
Mark Mazzilli — Signature of Owner/Contractor/Officer(s) of Corporation
Mark Mazzilli (May 8, 2025 11:30 EDT)
29130 — License #

Plumbing Contractor Information: Plumbing Cost $ 55,650.00

Description of Work Plumbing upgrades # Baths 1

Auman Plumbing, LLC — Plumbing Contractor's Company Name
910-818-3244 — Telephone
1606 Crescent Dr., Spring Lake, NC 28390 — Address
aumanplumbingllc@gmail.com / aumanplumbing.office@gmail.com — Email Address
Bryce Auman — Signature of Owner/Contractor/Officer(s) of Corporation
36211 — License #

Insulation Contractor Information

N/A to this project — Insulation Contractor's Company Name & Address
N/A To this project — Telephone

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

Sprinkler Contractor Information

N/A To this project	N/A To this project
Sprinkler Contractor's Company Name	Telephone
N/A To this project	N/A To this project
Address	Email Address
N/A To this project	N/A To this project
Signature of Officer(s) of Corporation	License #

Fire Alarm Contractor Information

N/A To this project	N/A To this project
Fire Alarm Contractor's Company Name	Telephone
N/A To this project	N/A To this project
Address	Email Address
N/A To this project	N/A To this project
Signature of Officer(s) of Corporation	License #

Driveway Access - NC Department of Transportation Driveway Access/Permit? _____Yes _XX_ 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.

Matthew Kelly, PM	05/06/2025
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:

_X_ 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:

_X_ 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.

Company or Name: DunRite, Inc.

Sign w/Title: SPM Matthew Kelly, PM Date: 05/06/2025