

*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: F and S Land Development LLC Date: 5/1/2015
Site Address: 94 Lunker LN, Fargway Varing NC Phone: 919-346-1528
Directions to job site from Lillington: Head N to Piney Grove Wilbon, Lft
Onto Wegstat to Hwy 42 to Lunker LN

Subdivision: N/A Lot: 6 John Douglas
Description of Proposed Work: New Mini/self Storage **Building 2**
Heated SF 17,900 Unheated SF 5,800 Building Cost \$ 950,000

General Contractor Information:
Triangle Home Pros LLC
Building Contractor's Company Name
6312 Laurence LN.
Address
Signature of Owner/Contractor/Officer(s) of Corporation
Telephone
THPHomes@gmail.com
Email Address
177019
License #

Electrical Contractor Information: Electrical Cost \$ _____
Description of Work Electric New Commercial Service Size: _____ Amps #T-Poles _____
NEC Power
Electrical Contractor's Company Name
117 Wild Blossom Drive Apex, NC 27539
Address
Telephone
919-81-6624
Email Address
mike@necpower.com

Digitally signed by Mike
Signature of Owner/Contractor/Officer(s) of Corporation
Mike Niclaus
Date: 2015.05.02
License #
U.28370

Mechanical Contractor Information: Mechanical Cost \$ _____
Description of Work _____ # Units _____
Custom AC Raleigh
Mechanical Contractor's Company Name
Telephone

Address
Email Address

Signature of Owner/Contractor/Officer(s) of Corporation
Plumbing Contractor Information: Plumbing Cost \$ _____
Description of Work Plumbing New Commercial Bldg # Baths _____
Romanoff Group
Plumbing Contractor's Company Name
Telephone

Address
Email Address

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

Insulation Contractor Information
Betco Incorporated
Insulation Contractor's Company Name & Address
Telephone
800-654-7813

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

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COMMERCIAL

Application for Building and Trades Permit

Owner's Name: F and S Land Development LLC Date: 5/1/2025
Site Address: 94 Lunker LN, Frying Marina NC Phone: 919-346-1528
Directions to job site from Lillington: Head N to Piney Grove Wilson, Left
onto Wagstaff to Hwy 42 to Lunker LN

Subdivision: N/A Lot: 6 John Douglas
Description of Proposed Work: New Mini/self Storage Building 2 -
Heated SF 17,900 Unheated SF 5,800
General Contractor Information: Building Cost \$ 950,000

Triangle Home Pros LLC
Building Contractor's Company Name
6312 Laurens LN
Address
[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation
Electrical Contractor Information: Electrical Cost \$ _____
Description of Work Electric New Commercial Service Size: _____ Amps #T-Poles _____
NEC Power
Electrical Contractor's Company Name

Telephone
THP Homes @ Gmail.com
Email Address
77019
License #
Telephone
Email Address

Signature of Owner/Contractor/Officer(s) of Corporation
Mechanical Contractor Information: Mechanical Cost \$ 95,900
Description of Work HVAC, New Commercial # Units 7
Custom AC Raleigh
Mechanical Contractor's Company Name
8809 Running Oak Drive Suite A Raleigh 27617
Address

Telephone
Richard @ CustomACraleigh.com
Email Address
23261
License #

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation
Plumbing Contractor Information: Plumbing Cost \$ _____
Description of Work Plumbing New Commercial Bldg # Baths _____
Romanoff Group
Plumbing Contractor's Company Name

Telephone
Email Address

Signature of Owner/Contractor/Officer(s) of Corporation
Insulation Contractor Information
Betco Incorporated
Insulation Contractor's Company Name & Address
800-654-7813
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

Fire Alarm Contractor's Company Name

Telephone

Address

Email Address

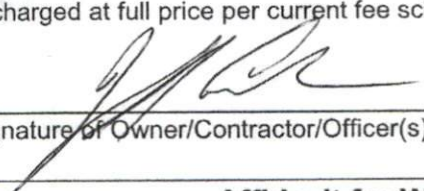
Signature of Officer(s) of Corporation

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

5/1/2025
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.

Company or Name: Triangle Home Pros LLC

Sign w/Title: [Signature]

President

Date: 5/1/2025