

*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 #	
The business	

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

COMMERCIAL

Application for Building and Trades Permit

Owner's Name:	Rhetson Companies,	nc.	Date:5/12/22	
City Address:	Mamers Rd Lillington, N	C Pin 06	10-97-0587 Phone: 910-944-0881	
Description of Proposed Work:	proposed construction of	a Dollar General Re	otall Store	
General C	ontractor Information:	Building Cost \$ _	669,000	
Rhetson Companies, Inc.			910-944-0881	
Building Contractor's Company Name			Telephone	
2075 Juniper Lake Rd.			jscott@rhetson.com	
Address	710		Email Address 55928	
Signature of Owner/Contractor	/Officer(s) of Cornoratio	n	License #	
Signature or Owner/Contractor	Contractor Information:	Electrical Cost \$	107,395	
Description of Workinstall all	l electrical wiring Ser	vice Size: 600	Amps #T-Poles 1	
Rainwater E	lectrical		010 557 5479 910 <u>331-5</u> 7	
Electrical Contractor's Compar			Telephone	
PO Box 136 Mars		i i	rainwaterelectrical@live.com	
Address)		-	Email Address	
Manual Strick	A.		U.26148	
Signature of Owner/Contractor	Officer(s) of Corporatio	n	License #	
Mechanical	Contractor Information): Mechanical Cos	st \$46,000	
Description of Work	ssociated dect EFs with duc	and duct work in ba	# Units3	
J&S Heating	and Air	i I	919-375-4535	
Mechanical Contractor's Comp			Telephone	
700 Pony Rd. Ste C			dakota@jsheatair.com	
Address			Email Address	
Ostfray (Jones		22675	
Signature of Owner Contractor	Officer(s) of Corporatio	in .	License #	
Plumbing Co	ontractor Information:	Iumbing Cost \$ _	15,000	
Description of Work	Install plumbing fixtures		# Baths	
Matt's Plumbing and F	Repair		910-730-4197	
Plumbing Contractor's Compa	ny Name		Telephone	
1800 Sandcrest Dr. Rockinghan	n, NC 28379	<u> </u>	mhaynes14@icloud.com	
Address WHT	Harra-		Email Address 26792	
Signature of Owner/Contractor	/Officer(s) of Corporatio	ן	License #	
Insulation Contractor Information				
Rhetson Companie		1	910-944-0881	
Insulation Contractor's Compa	ny Name & Address	!	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 Fire Alarm Cont	License #				
n/a					
Fire Alarm Contractor's Company Name	Telephone				
Address	Email Address				
Signature of Officer(s) of Corporation	License #				
Driveway Access - NC Department of Transport	ation Driveway Access/Permit? X Yes No				
I hereby certify that I have the authority to make necessand that the construction will conform to the regular Mechanical codes, and the Hamett County Zoning O contractors is correct as known to me and if any channumber of bedrooms, building and trade plans, Environ changes, I certify it is my responsibility to notify the Hany and all changes. Expired Permit Fees - 6 months to 2 years permit resis charged at full price per current fee schedule. Signature of Owner/Contractor/Officer(s) of Corporation	tions in the Building, Electrical, Plumbing and rdinance. I state the information on the above ges occur including listed contractors, site plan, mental Health permit changes or proposed use arnett County Central Permitting Department of issue fee is \$150.00. After 2 years re-issue fee				
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 past forth in the permit:	erson(s), firm(s) or corporation(s) performing the work				
Has three (3) or more employees and has obtain	ned workers' compensation insurance to cover them.				
Has one (1) or more subcontractors(s) and has them.	obtained workers' compensation insurance to cover				
Has one (1) or more subcontractors(s) who has covering themselves.	their own policy of workers' compensation insurance				
Has no more than two (2) employees and no su	bcontractors.				
While working on the project for which this permit is so ught 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: Jau & Cer EVF	of Operations Date: 5/18/2022				