

*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
Food Lion 2594

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Food Lion / Delhaize Date: 12/30/23

Site Address: 3260 Ray Rd, Spring Lake, NC 28390 Phone: 704-310-5711

Directions to job site from Lillington: _____
South on 210, turn right on Overhills Rd, take the 3rd rt at the round about

Subdivision: _____ Lot: _____

Description of Proposed Work: Interior remodel of existing Food Lion Grocery Store

Heated SF 33,830 Unheated SF _____

General Contractor Information: Building Cost \$ _____

Vertex Construction Company LLC
Building Contractor's Company Name 704-310-5711
Telephone

721 Corporate Circle, Salisbury, NC 28147
Address jejethurston@vertexconstructionNC.com
Email Address

Steve Thurston
Signature of Owner/Contractor/Officer(s) of Corporation 74904
License #

Electrical Contractor Information: Electrical Cost \$ 150,000.00
Description of Work interior remodel of existing Food Lion Service Size: _____ Amps #T-Poles _____

HCS Electric & Technologies Inc
Electrical Contractor's Company Name 302-383-3917
Telephone

726 Port Penn Rd, Middletown, DE 19709
Address hcs_electric2003@yahoo.com
Email Address

Carl Ramsey
Signature of Owner/Contractor/Officer(s) of Corporation U.30793
License #

Mechanical Contractor Information: Mechanical Cost \$ 11,500.00
Description of Work interior remodel of existing Food Lion # Units _____

Bohannon Electric, Heating & Air Cond. Ser., Inc
Mechanical Contractor's Company Name 804-352-8022
Telephone

1348 Richmond Hwy, Concord, VA 24538
Address bohannonoffice@aol.com
Email Address

James Bohannon
Signature of Owner/Contractor/Officer(s) of Corporation L21721
License #

Plumbing Contractor Information: Plumbing Cost \$ 38,800.00
Description of Work interior remodel of existing Food Lion # Baths _____

Garrett Construction Services, Inc
Plumbing Contractor's Company Name 434-942-1614
Telephone

9821 E WT Harris Blvd, CHarlotte, NC 28227
Address garrettron1@gmail.com
Email Address

Ron Garrett
Signature of Owner/Contractor/Officer(s) of Corporation L.16024
License #

Insulation Contractor Information

N/A
Insulation Contractor's Company Name & Address _____ Telephone _____

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

Sprinkler Contractor Information

Fire Technologies, Inc

910-675-0099

Sprinkler Contractor's Company Name

Telephone

PO Box 134, Castle Hayne, NC 28429

james.mills@firetechnologiesinc.com

Address

Email Address

Signature of Officer(s) of Corporation

30760

James Mills

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.

Steve Thurston

12/30/23

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:

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: Vertex Construction Company LLC

Sign w/Title: Steve Thurston Vice President

Date: 12/30/23