

\*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: T+L Coats, LLC Date: 8/21/2024  
Site Address: 330 E. Stewart St., Coats, NC 27521 Phone: 910-890-3256  
Directions to job site from Lillington: take Hwy. 27 to Coats, cross Hwy. 55 towards Benson . . . . site will be on the right.

Subdivision: N/A Lot: \_\_\_\_\_  
Description of Proposed Work: upfit construction for Blue Agave Mexican Grill

Heated SF 3500 Unheated SF \_\_\_\_\_  
**General Contractor Information:** Building Cost \$ 50,000.00  
Barefoot Building Company, LLC Telephone (910) 890-3256  
Building Contractor's Company Name  
Po Box 1411, Coats, NC 27521 Email Address wrbarefoot@yahoo.com  
Address  
[Signature] License # 81627

**Electrical Contractor Information:** Electrical Cost \$ 35,000.00  
Description of Work installation of electrical system Service Size: 400 Amps #T-Poles in place  
Reliant Electric and Power Telephone (919) 632-6963  
Electrical Contractor's Company Name  
222 Normandy Drive, Clayton, NC Email Address \_\_\_\_\_  
Address  
[Signature] License # 295884

**Mechanical Contractor Information:** Mechanical Cost \$ 60,000.00  
Description of Work installation of HVAC systems # Units 4  
JTM Heating + Air Condition Co., Inc. Telephone (910) 897-5501  
Mechanical Contractor's Company Name  
724 Turlington Road, Dunn, NC 28334 Email Address \_\_\_\_\_  
Address  
[Signature] License # L. 17164

**Plumbing Contractor Information:** Plumbing Cost \$ 45,000.00  
Description of Work installation of plumbing system # Baths 2  
Herrig Plumbing, LLC Telephone (910) 514-7807  
Plumbing Contractor's Company Name  
1080 Reedy Pong Creek Rd., Newton Grove, NC Email Address \_\_\_\_\_  
Address  
[Signature] License # 36262

**Insulation Contractor Information**  
Insulators Inc. - Sanford, NC - Sandy Clark Telephone (919) 470-1974  
Insulation Contractor's Company Name & Address

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

<u>Sprinkler Contractor Information</u>	
Sprinkler Contractor's Company Name <u>N/A</u>	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____
<u>Fire Alarm Contractor Information</u>	
Fire Alarm Contractor's Company Name <u>N/A</u>	Telephone _____
Address _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____
<b>Driveway Access</b> - NC Department of Transportation Driveway Access/Permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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]  
Signature of Owner/Contractor/Officer(s) of Corporation

8/21/2024  
Date

<b>Affidavit for Worker's Compensation N.C.G.S. 87-14</b>	
The undersigned applicant being the:	
<input checked="" type="checkbox"/> General Contractor	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> 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:	
<input type="checkbox"/> Has three (3) or more employees and has obtained workers' compensation insurance to cover them.	
<input type="checkbox"/> Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.	
<input checked="" type="checkbox"/> Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.	
<input type="checkbox"/> 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: <u>Barefoot Building Company, LLC</u>	
Sign w/Title: <u>[Signature], Member Manager</u>	Date: <u>8/21/2024</u>