

*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: Bancor Business Plaza LLC Date: 8/26/24
Site Address: 11132 Hwy 401N, Fuguey-Varina Phone: (910) 922-7010
Directions to job site from Lillington: 401N toward Fuguey-Varina, Approximately 1/8th mile past Rawls Club Rd. on Right.

Subdivision: NA Lot: NA
Description of Proposed Work: Foundations, Concrete Building Erection, PME's for
Heated SF (S1) 48000 Unheated SF (BR1) 13000 (BR2) 19100 (BR3) 6500 (S3) 5100 Buildings S1, S3, S4, BR1, BR2, + BK3
(S4) 4700 **General Contractor Information:** Building Cost \$ _____

Thaddeus C. McLean (919) 601-1402
Building Contractor's Company Name Telephone
465 Cedar Rock Trl., Fuguey-Varina tmclean0520@gmail.com
Address Email Address
Thaddeus C. McLean 83366 (unlimited)
Signature of Owner/Contractor/Officer(s) of Corporation License #

Electrical Contractor Information: Electrical Cost \$ _____
Description of Work Electric for New Buildings per plans. Service Size: 600 Amps #T-Poles no
Harte Electric LLC 919-639-6851

Electrical Contractor's Company Name Telephone
7836 NC HWY 55, Willow Springs, NC. harteelectricnc@gmail.com
Address Email Address
James Harte 23339-U
Signature of Owner/Contractor/Officer(s) of Corporation License #

Mechanical Contractor Information: Mechanical Cost \$ _____
Description of Work Install HVAC per Plan # Units 15
Modern Mechanical HVAC LLC 919-934-1651

Mechanical Contractor's Company Name Telephone
1544 Mechanical BLVD, Garner, NC. 27529 seisenmannjr@mmhvac.com
Address Email Address
Stephen Eisenmann Jr 29380 HW, H2, H3
Signature of Owner/Contractor/Officer(s) of Corporation License #

Plumbing Contractor Information: Plumbing Cost \$ _____
Description of Work _____ # Baths 2
Paramount Plumbing L.L.C. (919)-701-2844

Plumbing Contractor's Company Name Telephone
P.O. Box 661 Coats, NC 27521 bill.paramountplumbing@gmail.com
Address Email Address
William Collins 33809
Signature of Owner/Contractor/Officer(s) of Corporation License #

Insulation Contractor Information

Cornerstone Builders of NC - Thaddeus C. McLean (Same as General Contractor)
Insulation Contractor's Company Name & Address Telephone

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

Sprinkler Contractor Information

Carolina Fire Protection, Inc.

Sprinkler Contractor's Company Name

PO Box 250, Dunn, NC 28335

Address

Jeffrey Dunn

Signature of Officer(s) of Corporation

910-892-1700

Telephone

jdunn@carolinafireprotection.com

Email Address

NC License: FS-23769

License #

Fire Alarm Contractor Information

Woods Electronic Systems Company - Danny Wood, President

Fire Alarm Contractor's Company Name

119 S Railroad St. PO Box 58, Benson, NC. 27504

Address

Danny Wood

Signature of Officer(s) of Corporation

919-868-3262

Telephone

woodelectronicssystem.com

Email Address

29605

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

8/26/24
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: Thaddaus C. McLean

Sign w/Title: Thaddaus C. McLean President Date: 8/26/24