



ECOM 1811-0005
SIGN 1811-0002

Initial Application Date: _____

Application # _____
DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: H M's Kids Inc Mailing Address: 3035 NC 87 S

City: Cameron State: NC Zip: 28326 Contact # _____ Email: _____

APPLICANT*: Superior Sign Services Mailing Address: 10390 Alphaetta Suite 640

City: Roswell State: GA Zip: 30075 Contact # 770.362.9590 Email: tina@superiorsignservices.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Tina Peterson Phone # 770.362.9590

Address: 935 NC 24-87 Cameron, NC 28326 PIN: 9585-60-1139.000

Deed Book Page: 3070 / 853

PROPOSED USE:

- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Business Sq. Ft. Retail Space: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: _____
- Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____
- Accessory/Addition/Other (Size _____ x _____) Use: Replace existing menu boards with digital boards.

Water Supply: County Existing Well New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Comments: Replacing existing drive thru menu boards with newer, smaller, digital boards. New footings and new electrical connections.

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Tina Peterson
Signature of Owner or Owner's Agent

11/15/2018
Date

****This application expires 6 months from the initial date if permits have not been issued****
RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

*****It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.*****
This application expires 6 months from the initial date if permits have not been issued



Application # **SI6N1811-0002**
EXOM1811-0005

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

Application for Building and Trades Permit

Owner's Name: Owner of Property- McDonalds; Owner of Sign Company- Craig Barclay Date: 11/2/2018
 Site Address: 935 NC HIGHWAY 24-87
 Phone: 770-362-9590
 Description of Proposed Work: Replacing outdoor drive thru menu boards. New footings/electrical wiring.

General Contractor Information: Building Cost \$ 5,000

Superior Sign Services
 Building Contractor's Company Name
 10390 Alpharetta St Suite 640 Roswell, GA 30075
 Address
Tim Foster
 Signature of Owner/Contractor/Officer(s) of Corporation
 Electrical Contractor Information: Electrical Cost \$ 5,000
 Description of Work New wiring run off (x2) 20 amp Service Size: (x2) 20 Amps #T-Poles
 Beach Electronics- Jason Beach
 Electrical Contractor's Company Name
 751 Sugarloaf Rd Boone, NC 28607
 Address
Jason N. Beach
 Signature of Owner/Contractor/Officer(s) of Corporation
 Mechanical Contractor Information: Mechanical Cost \$
 # Units

Description of Work

Mechanical Contractor's Company Name N/A
 Telephone

Address

Signature of Owner/Contractor/Officer(s) of Corporation
 Plumbing Contractor Information: Plumbing Cost \$
 License #
 # Baths

Description of Work

Plumbing Contractor's Company Name N/A
 Telephone

Address

Signature of Owner/Contractor/Officer(s) of Corporation
 Insulation Contractor Information

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

***NOTE: General Contractor must fill out and sign the second page of this application**
 strong roots • new growth

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.

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____	Telephone _____
Address _____ N/A _____	Email Address _____
Signature of Officer(s) of Corporation _____	License # _____

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____	Telephone _____
Address _____ N/A _____	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	11/2/2018 _____ Date
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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

Sign w/Title:  _____ Office Manager/ Authorized Representative	Date: 11/2/2018 _____
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