

*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
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: DRB Group, 3000RDU Center Drive Ste. 202, Morrisville NC 27560 Date: 6/14/22

Site Address: Hay Field Drive, Lillington NC 27546 Phone: 919-747-4970

Directions to job site from Lillington: Travel North on Hwy 210. Site will be on the left between Matthews Road and Harnett Central Road. Entry Monument Sign to located on the left side of entrance from Hwy 210.

Subdivision: The Farm at Neill's Creek Lot: Entrance

Description of Proposed Work: Entry Monument Sign

Heated SF N/A Unheated SF N/A

General Contractor Information: Building Cost \$ 20,000.00

Clayton Constructors, Inc. dba Post Nursery
Building Contractor's Company Name

919-554-4005
Telephone

8140 Mitchell Mill Road, Zebulon NC 27597
Address

postclayton1994@gmail.com
Email Address

Justin Hooks
Signature of Owner/Contractor/Officer(s) of Corporation

NCLCLB#CL0093
License #

Electrical Contractor Information: Electrical Cost \$ 2,000.00

Description of Work Meter base, panel box, outlet & ground rods Service Size: 100 Amps #T-Poles _____

ESB Electric Company
Electrical Contractor's Company Name

919-876-4194
Telephone

5912 Dean Avenue, Raleigh NC 27616
Address

esbelectric@gmail.com
Email Address

Scott Beverly
Signature of Owner/Contractor/Officer(s) of Corporation

17674-L
License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

Mechanical Contractor's Company Name

Telephone

Address

Email Address

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

License #

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name

Telephone

Address

Email Address

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

License #

Insulation Contractor Information

Insulation Contractor's Company Name & Address

Telephone

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

Sprinkler Contractor Information

Sprinkler Contractor's Company Name

Telephone

Address

Email Address

Signature of Officer(s) of Corporation

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.

Justin Hooks / Clayton Constructors Inc., dba Post Nursery
Signature of Owner/Contractor/Officer(s) of Corporation

6/14/22
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: _____ Clayton Constructors Inc., dba Post Nursery

Sign w/Title: _____ Justin Hooks _____ Date: 6/14/22