\*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: Greenfield Serenity LLC		Date: 10/17/2022
Site Address: 469 Piney Grove Rawls Road, Fuquay-Varina, NC 27526		
Directions to job site from Lillington: From Lillington, Head toward S. Ma		
Then head toward US-401 N. Go 8.9 Miles on US-401 N. Turn left onto		·
Then head teward 66 for 14. 66 6.6 Million 617 66 107 14. Turn for 6176	r may crove rian	VIO 1 (d. VVIII 20 011 10 It.
Subdivision: Serenity by Garman Homes	Lot:	
Description of Proposed Work: (Type 2B) Installation of Pre-Manufactur	red Windmill At Se	erenity Amenity Site
Heated SF 75 SF Total Unheated SF		
General Contractor Information: Building Cost \$	25,000.00	_
D.Clugston Inc.	828-712-6004	
Building Contractor's Company Name	Telephone	
2506 Reliance Ave. Apex, NC 27539	joey@dclugstor	n.com
Address	Email Address	
Joey Davis	59538-U	
Signature of Owner/Contractor/Officer(s) of Corporation	License #	
Electrical Contractor Information: Electrical Cost Subscription of Work Service Size:	\$	
Description of Work Service Size: _	Amps	#1-Poles
Electrical Contractor's Company Name	Telephone	
Address	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation  Mechanical Contractor Information: Mechanical Contractor Information:	License #	
Description of Work		
Mechanical Contractor's Company Name	Telephone	
Address	Email Address	
Signature of Owner/Contractor/Officer(s) of Corporation  Plumbing Contractor Information: Plumbing Cost	License #	
Description of Work		
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	

Sprinkler Contractor Information	<u>n</u>	
Sprinkler Contractor's Company Name	Telephone	
Address	Email Address	
Signature of Officer(s) of Corporation  Fire Alarm Contractor Information	License #	
Fire Alarm Contractor's Company Name	Telephone	
Address	Email Address	
Signature of Officer(s) of Corporation	License #	
<u>Driveway Access</u> - NC Department of Transportation Driveway Access/Permit?YesNo		
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 <u>any</u> 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.		
Joey Davis	10/17/2022	
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:		
X 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:		
X 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: D.Clugston Inc.		
Sign w/Title: Project Manager - Josy Davis	Date: 10/17/2022	

#### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 1654697

Filed on: 03/16/2022 Initially filed by: dclugston

## Designated Lien Agent

North American Title Insurance Company

Online: www.liensnc.com (http://www.liensnc.com)

Address: 223 S. West Street, Suite 900 / Raleigh, NC 27603

Phone: 888-690-7384
Fax: 913-489-5231

Email: support@liensnc.com (mailto:support@liensnc.com

#### Owner Information

Greenfield Serenity LLC 8601 Six Forks Rd STE 270 Raleigh, NC 27615 United States

Email: office@dclugston.com

Phone: 919-629-7290

#### **Project Property**

PIN: 0655-13-4450.000 PID: 080655 0032 15 Description: IOS 3 Amenity Area Serenity Map # 2022-45 Piney Grove Rawls Rd Fuquay-Varina, NC 27526 Harnett County

#### Property Type

Other

#### Date of First Furnishing

04/16/2022

#### Print & Post



#### Contractors:

Please post this notice on the Job Site.

## Suppliers and Subcontractors:

Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this project.

View Comments (0)

Technical Support Hotline: (888) 690-7384