\*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: Tripointe Homes Holdings, Inc.	Date: 8/27/2025
Site Address: 325 Streamside Terrace, Fuguay Varina NC 27526	Phone: 919-300-4914
Directions to job site from Lillington: I-40 E, US-1S /US-64 W, U.S. Rte	e 1S, NC-55 E & NC-55 Bypass - E
to S Main Street Holly Springs to Piney Grove-Wilbon Road to Serenity	
to 325 Streamside Terrace	
Subdivision: Serenity	Lot: IOS 7
Description of Proposed Work: Clubhouse	
Heated SF 7,893 Unheated SF 1,649	
General Contractor Information: Building Cost \$	2,528,482.00 Cell
Inland Construction Co of North Carolina	919-821-1300/919-422-5
Building Contractor's Company Name	Telephone /
3709 Auburn Church Road Gamer, NC 27529	mike @ inlandconstruction co.
Address	Email Address
The state of the s	75(25 License #
Signaturé of Owner/Contractor/Officer(s) of Corporation  Electrical Contractor Information: Electrical Cos	t \$ 340,000. 9
Description of Work Electrical Service Size	Amps #T-Poles
Inderden Inc.	919-1048-0808
Electrical Contractor's Company Name	Telephone
715/ O'Kelly Chapel Road, Suite 309 Cary NC 275	19 vik@inderdeo.com
Address	Email Address
2 Company of Company o	<u>U-32021</u> License #
Signature of Owner/Contractor/Officer(s) of Corporation  Mechanical Contractor Information: Mechanical	Cost \$ 302,000,00
Description of Work HVAC	# Units
Sampson Services	919-779-7434
Mechanical Contractor's Company Name	Telephone
179 Donmoor Court Garner, NC 27529	jay@gtmservice.hvac.com
Address	Email Address
to conton	L.28557
Signature of Owner/Contractor/Officer(s) of Corporation  Plumbing Contractor Information: Plumbing Cost	License # st \$ _[93,000,000]
Description of Work Plumbing	# Baths
Str8pipe Plumbing	252-236-5352
Plumbing Contractor's Company Name	Telephone
7024 Great Swamp Loop Lucama, NC 27851	Str8pipe Dlumbing @ Uaboo. cor
Address	Email Address
Hamme le a. Till . Jan	L. 29387
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	n
LIVE Green	919-453-6411
Insulation Contractor's Company Name & Address	Telephone

Sprinkler Contractor imormation		
J+D Sprinkler	919-553-2356	
Sprinkler Contractor's Company Name	Telephone	
315 W. Main Street Clayton, NC 27520	brodley@idsprnkler.com	
Address	Email Address	
73	L. 16269	
Signature of Officer(s) of Corporation	License #	
Fire Alarm Contractor Information		
Inderded Inc.	919-648-0808	
Fire Alarm Contractor's Company Name	Telephone	
7151 O'Kelly Chapel Road Stuto 309 Cary NC 27519	to the same of the	
Address	<u>VIVO Inderdeo, com</u> Email Address	
71031033		
Strandura of Officer(s) of Company	<u>U-3a0a1</u>	
Signature of Officer(s) of Corporation	License #	
<u>Driveway Access</u> - 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 <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.		
Mart	almine	
Signature of Owner/Contractor/Officer(s) of Corporation	Plantap	
Signature of Owner/Contractor/Onicosts/or Corporation	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: Inland Construction Co. of North Carolina		
Sign w/Title: President	Date: 8 29 25	