

Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Jeremy + Jill Biggs Date: 5/26/22
Site Address: 560 Purfoy Rd Fuquay Varina, NC Phone: _____
Subdivision: _____ 27526 Lot: _____
Description of Proposed Work: 16x32 Inground Pool Total Job Cost: \$28,325.00

General Contractor Information

Capitol Pools, Inc. 919-669-9713
Building Contractor's Company Name Telephone
128 US Hwy 70 East Garner, NC 27529 ben@capitolpools.com
Address Email Address
N/A HEATED SOFT GARAGE SOFT
License #

Electrical Contractor Information

Description of Work _____ Service Size: _____ Amps T-Pole: Yes No
Volt Doctors of Raleigh 919-618-2336
Electrical Contractor's Company Name Telephone
5300 Atlantic Ave. Suite J Raleigh, NC 27603 N/A
Address Email Address
26915 SFD
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Capitol Plumbing 919-783-5525
Mechanical Contractor's Company Name Telephone
14460 Falls of Neuse Rd Raleigh, NC 27619 N/A
Address Email Address
20157
License #

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor's Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

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

Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that **by signing below I have obtained all subcontractors permission to obtain these permits** 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 as per current fee schedule.

Edward A. Syc
Signature of Owner/Contractor/Officer(s) of Corporation

5/26/22
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.

Sign w/Title: Edward A. Syc

Date: 5/26/22