



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

* 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: DAVID CERRILLOS Date 1/23/24

Site Address: 1022 Joe Collins Rd, Lillington NC Phone 919-524-5374

Subdivision: _____ Lot _____

Description of Proposed Work: Inground Pool Total Job Cost 88,249.00

General Contractor Information

ELite Pools Spas & Hardscapes 252-689-6557

Building Contractor's Company Name Telephone

1842 Progress Rd, Greenville NC, 27834 permits@elitepoolsnc.com

Address Email Address

70071 **HEATED SQ FT** **CARAGE SQ FT**

License #

Electrical Contractor Information

Description of Work Installing pool equipment Service Size: 100 Amps T-Pole: Yes No

ELite Pools Spas & Hardscapes 252-689-6557

Electrical Contractor's Company Name Telephone

1842 Progress Rd Greenville NC 27834 permits@elitepoolsnc.com

Address Email Address

28458

License #

Mechanical/HVAC Contractor Information

Description of Work _____

Mechanical Contractor's Company Name Telephone

Address Email Address

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.**



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 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.

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

1/23/24
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: [Signature] Brian Schutz - Elite Pools, owner ~~ceo~~ Date: 1/23/24

See attached COI

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Ph.: 910-893-7525 - Fax: 910-893-2793 / www.harnett.org/permits

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: Davin Cerrillos Phone: 919-524-5374

Owner (s) Mailing Address: 1022 Joe Collins Rd Lillington, NC 27546

Land Owner Name (s): Same Phone: 919-524-5374

Construction or Site Address: 1022 Joe Collins Rd Lillington NC 27546

PIN # 0630-59-4666.000 Parcel # 130630 0071

Job Cost (Required): _____ Description of Work to be done Installing inground
Swimming Pool, concrete deck and pool equipment (pump, filter etc)

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

Subdivision: _____ Lot #: _____

I Brian Schutz will provide the electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28458, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Elite Pools Spas & Landscapes
Contractor's Company Name

1842 Progress Rd, Greenville NC 27834
Address

28458
License #

252-689-6557
Telephone

permits@elitepoolsnc.com
Email Address

Structure Owner / Contractor Signature: [Signature] Date: 1/23/24

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work

***Company name, address, & phone must match information on license**

Faxed or Mailed application could have an approximately 1-5 day process time