## Clubhouse Building Permit Application

Harnett

\*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 Parmit

| Trade   | s Permit                            |
|---|-------------------------------------|
| Owner's Name: Greenfield Serenity LLC                               | Date: 03/16/2022                    |
| Site Address: Piney Grove Rawls Road, Fuquay-Varina, NC 27526       | Phone: 828-712-6004                 |
| Description of Proposed Work: 5000 SF Community Clubhouse & Po      | ol 525 / 12-6004                    |
| General Contractor Information: Building Cost 5                     | 489,000.00                          |
| D.Clugston Inc.   | 828-712-6004                        |
| Building Contractor's Company Name                                  | Telephone                           |
| 2506 Reliance Ave. Apex, NC 27539                                   |                                     |
| Address   | joey@dclugston.com<br>Email Address |
| Josy Davis  | 59538-U                             |
| Signature of Owner/Contractor/Officer(s) of Corporation             | Ligonog #                           |
| Electrical Contractor Information: Floatrical Cont                  | 1 icense #<br>\$ 95,000.99          |
| Service Size:   | Amps #T-Poles                       |
| Brothers Electric Company   | 919-787-5558                        |
| Electrical Contractor's Company Name                                | Telephone                           |
| 6002 Triangle Dr. Suite B. Raleigh, NC 27617                        | brotherselectric@bellsouth.net      |
| Address   | Email Address                       |
| - fillwirlen  | 11451U                              |
| Signature of Owner/Contractor/Officer(s) of Corporation             | Liganas #                           |
| mechanical Contractor Information: Mechanical Co                    | ost \$ . 41, 170.00                 |
| Description of Work Installation of all mechanical related items    | # Units                             |
| Modern Mechanical HVAC LLC  | 919-934-1651                        |
| Mechanical Contractor's Company Name                                | Telephone                           |
| 1544 Mechanical Blvd. Garner, NC 27529                              | solutions@modernmechhvac.com        |
| Address   | Email Address                       |
| Stephen Eisenmann Or  | 29380                               |
| Signature of Owner/Contractor/Officer(s) of Corporation             | License #                           |
| Plumbing Contractor Information: Plumbing Cost \$                   | 47,300.00                           |
| Description of Work Installation of all plumbing related items      | # Baths                             |
| Solomon Plumbing  | 336-309-4298                        |
| Plumbing Contractor's Company Name                                  | Telephone                           |
| 9595 John White Rd. Midland, NC 28107                               | sburns@solomonplumbing.net          |
| Address   | Email Address                       |
| 901 ( Kile  | 27875 P-1                           |
| signature of Owner/Contractor/Officer(s) of Corporation             | License #                           |
| •   | LIGHTISE #                          |
| ri-City Insulation 7304 Part City Insulation Contractor Information |                                     |
| ri-City Insulation - 7204 Becky Circle, Raleigh, NC 27617           | 919-790-9684                        |
| sulation Contractor's Company Name & Address                        | Telephone                           |

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

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| Sprinkler Contractor Information   |                                     |  |
|--|-------------------------------------|--|
| N/A  |                                     |  |
| Sprinkler Contractor's Company Name  | Telephone                           |  |
| Address  | Email Address                       |  |
| Signature of Officer(s) of Corporation  License #  Fire Alarm Contractor Information   |                                     |  |
| N/A  |                                     |  |
| 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? 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 <a href="mailto:any">any</a> 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. |                                     |  |
| Closy Davis  | 03/16/2022                          |  |
| 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:   |                                     |  |
| General Contractor Owner Officer/Agen  | t 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.  |                                     |  |
|  | 's' compensation insurance to cover |  |
| Has one (1) or more subcontractors(s) who has their own policy covering themselves.  | ,                                   |  |
|  | ,                                   |  |
| covering themselves.   | tood that the Central Permitting    |  |