

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Salvatore & Kathy Meruogliano Date: 3/9/20
 Site Address: 6718 Christian Light Rd. Phone: 919-630-3584
 Subdivision: Hectors Creek Lot: _____
 Description of Proposed Work: installing 15x30 fiberglass inground pool

General Contractor Information

Cool Pools NC, LLC 919-367-7277
 Building Contractor's Company Name Telephone
2300 Old US 1 Hwy Apex, NC 27502 cherie@coolpoolsnc.com
 Address Email Address
59776
 License #

Electrical Contractor Information

Description of Work pool equipment hookup Service Size: _____ Amps T-Pole: Yes No
ARC Electric, LLC 919-888-3500
 Electrical Contractor's Company Name Telephone
P.O. Box 58355 Raleigh, NC 27658 customer@arcelectric.com
 Address Email Address
29565-U
 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 # _____

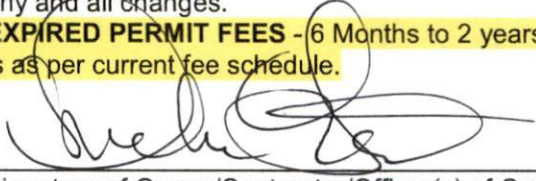
Insulation Contractor Information

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 of Owner/Contractor/Officer(s) of Corporation

3/9/2020

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

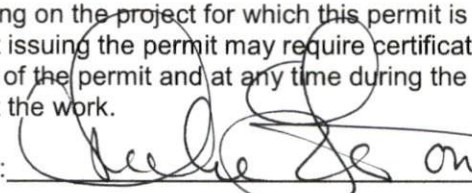
The undersigned applicant being the:

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:  on owner Date: 3/9/2020