Pool 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 910-853-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades 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 & Pool	
General Contractor Information: Building Cost \$	150,000.00
D.Clugston Inc.	828-712-6004
Building Contractor's Company Name	Telephone
2506 Reliance Ave. Apex, NC 27539	joey@dclugston.com
Address	Email Address
Josy Davis	59538-U
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Electrical Contractor Information: Electrical Cost \$	20,000.00
Description of Work Installation of all electrical Service Size: Brothers Electric Company	919-787-5558
Electrical Contractor's Company Name	Telephone
6002 Triangle Dr. Suite B. Raleigh, NC 27617	
Address	brotherselectric@bellsouth.net Email Address
11111111111111111111111111111111111111	11451U
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Mechanical Contractor Information: Mechanical Cos	
Description of Work Installation of all mechanical related items	
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 Plumbing Contractor Information: Plumbing Cost \$	15,000,00
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
THE PLANT OF THE PARTY OF THE P	27875 P-1
Signature of Owner/Contractor/Officer(s) of Corporation	License #
Insulation Contractor Information	
Tri-City Insulation - 7204 Becky Circle, Raleigh, NC 27617	919-790-9684
Insulation Contractor's Company Name & Address	Telephone

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



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 <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.		
Joey 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:		
	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.		
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: Josy Davis Project Manager	Date: 03/16/2022	