

Application #

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

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

## **Application for Residential Building and Trades Permit**

Owner's Name: Weekley Homes LLC		Date 10/21/2022
Site Address: 57 Serendipity Drive, Fuquay-Varina, NC 27526	Phone	919.659.1500
Subdivision: Serenity	Lot _50	0
Description of Proposed Work: Single Family Dwelling	_ Total Job Cost _	\$221,390
General Contractor Information		
Weekley Homes LLC Building Contractor's Company Name	919.659.1505 Telephone	
1111 North Post Oak Road, Houston TX 77055 Address	ralpermits@dwhomes.com Email Address	
40179 HEATED SQ FT_2631 GARAGE SQ License #		
Description of Work Wiring <u>Electrical Contractor Information</u> Service Size:		ole X Yes No
MSF Electric		010. <u>X</u> 100140
Electrical Contractor's Company Name	919.217.9767 Telephone	
7513 Knightdale Blvd, Knightdale, NC 27545	mandyk@msfelectric.com	
Address	Email Address	
U.34688 License # Machanical/HVAC Contractor Inform	ation	
Mechanical/HVAC Contractor Inform	<u>ation</u>	
Description of Work HVAC System	<u>ation</u>	
Description of Work HVAC System  Dolan Design	919.896.8630	
Description of Work HVAC System		
Description of Work HVAC System  Dolan Design  Mechanical Contractor's Company Name  3209 Wellington Ct Ste 107, Raleigh, NC 27615	919.896.8630 Telephone larry@dolandesig	nhvac.com
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Description of Work HVAC System  Dolan Design  Mechanical Contractor's Company Name  3209 Wellington Ct Ste 107, Raleigh, NC 27615  Address  20026  License #  Plumbing Contractor Information  Description of Work Plumbing  Poole's Plumbing	919.896.8630 Telephone larry@dolandesig Email Address	nhvac.com
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Description of Work HVAC System  Dolan Design  Mechanical Contractor's Company Name  3209 Wellington Ct Ste 107, Raleigh, NC 27615  Address  20026  License #  Plumbing Contractor Information  Description of Work Plumbing  Poole's Plumbing  Plumbing Contractor's Company Name  200 Tinsteel Court, Garner, NC 27529  Address  21404	919.896.8630 Telephone larry@dolandesignemail Address  1 # Baths 3 919.661.6334 Telephone bobp@poolespli	
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\*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.

Robin Caparell Signature of Owner/Contractor/Officer(s) of Corporation  10/21/2022 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:Date:	