

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 <u>01/20/2023</u>			
Site Address: 124 Serendipity Drive, Fuquay-Varina, NC 27526	Phone	919.659.1500		
Subdivision: Serenity Lot 54				
Description of Proposed Work: New Single Family Dwelling	_ Total Job Cost	\$271,050		
General Contractor Information	L			
Weekley Homes LLC Building Contractor's Company Name	919.659.1505 ame Telephone			
North Post Oak Road, Houston TX 77055 ress ralpermits@dwhomes.com Email Address		nomes.com		
40179 HEATED SQ FT 3209 GARAGE SQ License #				
Description of Work Wiring <u>Electrical Contractor Information</u> Service Size:		ole X Yes No		
MSF Electric	919.217.9767			
Electrical Contractor's Company Name	Telephone			
7513 Knightdale Blvd, Knightdale, NC 27545	mandyk@msfelectric.com			
Address				
U.34688 License # Mechanical/HVAC Contractor Inform	<u>ation</u>			
Description of Work HVAC System				
Dolan Design	919.896.8630			
Mechanical Contractor's Company Name Telephone				
3209 Wellington Ct Ste 107, Raleigh, NC 27615 Address Email Address				
	larry@dolandesig	nhvac.com		
Address	•	nhvac.com		
	larry@dolandesig	nhvac.com		
Address 20026	larry@dolandesig Email Address	nhvac.com		
Address 20026 License #	larry@dolandesig Email Address			
Address 20026 License # Plumbing Contractor Information Description of Work Plumbing Poole's Plumbing	larry@dolandesig Email Address n_ # Baths 3 1/2 919.661.6334			
Address 20026 License # Plumbing Contractor Information Description of Work Plumbing	larry@dolandesig Email Address n # Baths 3 1/2			
Address 20026 License # Plumbing Contractor Information Description of Work Plumbing Poole's Plumbing	larry@dolandesig Email Address n_ # Baths 3 1/2 919.661.6334			
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	Iarry@dolandesig Email Address n # Baths 3 1/2 919.661.6334 Telephone bobp@poolesple			
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 License #	Iarry@dolandesig Email Address n # Baths 3 1/2 919.661.6334 Telephone bobp@poolesple Email Address			
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	Iarry@dolandesig Email Address n # Baths 3 1/2 919.661.6334 Telephone bobp@poolesple Email Address			

*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/Office	er(s) of Corporation			
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 employ	ees and has obtain	ed 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:		