

Application #

Harnett County Central Permitting 420 McKinney Pkwy Lillington, NC 27546 [•] Must be owner/occupier or PO Box 65 Lillington, NC 27546 licensed contractor. Address, 910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits company name & phone must match information on license. Application for Residential Building and Trades Permit Owner's Name: Weekley Homes LLC Date 04/28/2023 Site Address: 50 Sneed Lane, Fuquay-Varina, NC 27526 Phone 919.659.1500 Subdivision: Serenity Lot 11 _____ Total Job Cost <u>\$221,390</u> Description of Proposed Work: New Single Family Dwelling **General Contractor Information** Weekley Homes LLC 919.659.1505 Building Contractor's Company Name Telephone 1111 North Post Oak Road, Houston TX 77055 ralpermits@dwhomes.com Email Address Address 40179 HEATED SQ FT 2631 GARAGE SQ FT 596 License # **Electrical Contractor Information** Description of Work Wiring Service Size: Amps T-Pole: X Yes No 919.2<u>17.9767</u> MSF Electric Electrical Contractor's Company Name Telephone 7513 Knightdale Blvd, Knightdale, NC 27545 mandyk@msfelectric.com Address Email Address U.34688 License # Mechanical/HVAC Contractor Information Description of Work HVAC System 919.896.8630 **Dolan Design** Mechanical Contractor's Company Name Telephone 3209 Wellington Ct Ste 107, Raleigh, NC 27615 larry@dolandesignhvac.com Email Address Address 20026 License # **Plumbing Contractor Information** Description of Work Plumbing # Baths 3 Poole's Plumbing 919.661.6334 Plumbing Contractor's Company Name Telephone 200 Tinsteel Court, Garner, NC 27529 bobp@poolesplumbing.com Email Address Address 21404 License # **Insulation Contractor Information** Builders Insulation 9521 Lumley Road, Suite 200, Morrisville NC 27560 919.788.9806 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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> 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 as per current fee schedule.

Robin Caparell

Signature of Owner/Contractor/Officer(s) of Corporation

04/28/2023 Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
General Contractor	Owner>	K	_ Officer/Agent of the Co	ntractor or Owner
Do hereby confirm under penalties set forth in the permit:	of perjury that the	e pei	rson(s), firm(s) or corpora	ation(s) performing the work
Has three (3) or more emplo	oyees and has ob	taine	ed workers' compensation	n insurance to cover them.
Has one (1) or more subcor them.	ntractors(s) and ha	as ol	otained workers' compen	sation insurance to cover
\underline{X} Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.				
Has no more than two (2) er	mployees and no	subo	contractors.	
While working on the project for wh Department issuing the permit may to issuance of the permit and at an carrying out the work.	/ require certificate	es of	f coverage of worker's co	mpensation insurance prior
Sign w/Title: Robin Caparell / Pro	oject Coordinato	r		Date: 04/28/2023