

Application # _____

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

* Must be owner/occupier or licensed contractor. Address, company name & phone must

match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Tri Pointe Homes Holdings LLC	Date 11/26/24	
Site Address: 80 Serene Crossing	010 200 4001	
Subdivision: Serenity	Lot280	
Description of Proposed Work: New Residential Construction	Total Job Cost \$175,000	
General Contractor Informatio		
Tri Pointe Homes Holdings LLC	919-300-4901	
Building Contractor's Company Name	Telephone	
5440 Wade Park Blvd, Suite 400, Raleigh, NC, 27607	RaleighPermits@tripointehomes.co	
Address	Email Address	
82776 HEATED SQ FT 2527 GARAGE	SQ FT ⁴⁹⁷	
License #		
Description of Work Electrical work for new residential construction Service Size		
	e: <u>200</u> Amps T-Pole: <u>x</u> Yes <u>No</u>	
Tool Time Services Electrical Contractor's Company Name	<u>910-316-9063</u> Telephone	
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PO Box 2207, Garner, NC 27529 Address	tooltimeservices@gmail.com Email Address	
<u>30306-U</u> License #		
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<u>30306-U</u> License # Description of Work <u>HVAC work for new residential construction</u>	rmation	
<u>30306-U</u> License # <u>Mechanical/HVAC Contractor Infor</u>		
<u>30306-U</u> License # Description of Work <u>HVAC work for new residential construction</u> <u>Caryl Mechanicals</u> Mechanical Contractor's Company Name	<u>rmation</u> 	
<u>30306-U</u> License # Description of Work <u>HVAC work for new residential construction</u> Caryl Mechanicals	<u>rmation</u> 	
<u>30306-U</u> License # Description of Work <u>HVAC work for new residential construction</u> <u>Caryl Mechanicals</u> Mechanical Contractor's Company Name <u>5910 Stockbridge Drive, Monroe, NC 28110</u> Address <u>16647</u>	rmation 	
30306-U License # Mechanical/HVAC Contractor Infor Description of Work <u>HVAC work for new residential construction</u> Caryl Mechanicals Mechanical Contractor's Company Name 5910 Stockbridge Drive, Monroe, NC 28110 Address 16647 License #	<u>mation</u> <u>704-882-4522</u> Telephone <u>mwalker@caryImechanicals.co</u> m Email Address	
30306-U License # Mechanical/HVAC Contractor Infor Description of Work <u>HVAC work for new residential construction</u> Caryl Mechanicals Mechanical Contractor's Company Name 5910 Stockbridge Drive, Monroe, NC 28110 Address 16647 License # Plumbing Contractor Informate	<u>rmation</u> <u>704-882-4522</u> Telephone <u>mwalker@caryImechanicals.co</u> m Email Address	
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30306-U License # Mechanical/HVAC Contractor Infor Description of Work <u>HVAC work for new residential construction</u> Caryl Mechanicals Mechanical Contractor's Company Name 5910 Stockbridge Drive, Monroe, NC 28110 Address 16647 License # Plumbing Contractor Informat Description of Work Plumbing work for new residential construction All American Plumbing Plumbing Contractor's Company Name PO Box 274, Scurry, TX 75158 Address	rmation 704-882-4522 Telephone mwalker@caryImechanicals.com Email Address ion # Baths 910-897-3001 Telephone	
30306-U License # Mechanical/HVAC Contractor Infor Description of Work _HVAC work for new residential construction Caryl Mechanicals Mechanical Contractor's Company Name _5910 Stockbridge Drive, Monroe, NC 28110 Address 16647 License # Plumbing Contractor Informat Description of Work _Plumbing work for new residential construction All American Plumbing Plumbing Contractor's Company Name PO Box 274, Scurry, TX 75158 Address _23263	rmation 	
30306-U License # Mechanical/HVAC Contractor Information Description of Work _HVAC work for new residential construction Caryl Mechanicals Mechanical Contractor's Company Name _5910 Stockbridge Drive, Monroe, NC 28110 Address 16647 License # Plumbing Contractor Informat Description of Work _Plumbing work for new residential construction All American Plumbing Plumbing Contractor's Company Name PO Box 274, Scurry, TX 75158 Address _23263 License #	rmation 704-882-4522 Telephone mwalker@caryImechanicals.com Email Address ion # Baths 910-897-3001 Telephone eavery@aapcoinc.net Email Address	
<u>30306-U</u> License # <u>Mechanical/HVAC Contractor Infor</u> Description of Work <u>HVAC work for new residential construction</u> <u>Caryl Mechanicals</u> Mechanical Contractor's Company Name <u>5910 Stockbridge Drive, Monroe, NC 28110</u> Address <u>16647</u> License # <u>Plumbing Contractor Informat</u> Description of Work <u>Plumbing work for new residential construction</u> <u>All American Plumbing</u> Plumbing Contractor's Company Name <u>PO Box 274, Scurry, TX 75158</u> Address <u>23263</u>	rmation 704-882-4522 Telephone mwalker@caryImechanicals.com Email Address ion # Baths 910-897-3001 Telephone eavery@aapcoinc.net 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.

ames Myers

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

11/26/24 Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: X 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 carrving out the work.

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Sign w/Title:	James Myers	Date:	11/26/24
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