

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 05/01/2025 Site Address: 62 Restful Pt, Fuguay-Varina, NC 27526 Phone 919.659.1500 Subdivision: Serenity Lot 1053 Description of Proposed Work: <u>New Single Family Dwelling</u> Total Job Cost <u>\$175.370</u> **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 1991 GARAGE SQ FT 406 License # **Electrical Contractor Information** Description of Work Wiring Service Size: Amps T-Pole: X Yes No MSF Electric 919.217.9767 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 (984) 301-0114 Reliable Heating & Air Mechanical Contractor's Company Name Telephone 530 Hinton Pond Rd., Suite 148, Knightdale, NC 27545 josh@reliableheatandair.com Address Email Address L.33797 License # **Plumbing Contractor Information** # Baths 2.5 Description of Work Plumbing PBI R1- LLC DBA 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

05/01/2025 Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:					
General Contra	actor	Owner	Х	Officer/Agent of the	Contractor or Owner
Do hereby confirm unde set forth in the permit:	er penalties of	perjury that t	he per	son(s), firm(s) or corp	poration(s) performing the work
Has three (3) or r	more employe	es and has o	btaine	d workers' compensa	ation insurance to cover them.
Has one (1) or m them.	ore subcontra	ctors(s) and	has ob	tained workers' com	pensation 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 that	n two (2) empl	oyees and n	o subc	ontractors.	
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: Robin Cap	oarell / Projec	t Coordinat	or		Date: 05/01/2025