



*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # _____

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546

910-893-7525 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: DAVIDSON HOMES, LLC Date: 03/07/23

Site Address: 29 SINGLE BARREL COURT Phone: 984-217-8561

Description of Proposed Work: Community Sales Office in the garage of a model home

General Contractor Information: Building Cost \$ 5,000

DAVIDSON HOMES, LLC

984-217-8561

Building Contractor's Company Name

Telephone

336 JAMES RECORD ROAD HUNTSVILLE, AL 35824

CHowell@davidsonhomesllc.com

Address Brad Nelson Raleigh Division President Davidson Homes, LLC

Email Address 80381

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

License #

Electrical Contractor Information: Electrical Cost \$ 1,300.00

Description of Work WIRING OF OFFICES Service Size: 200 Amps #T-Poles x

TOOL TIME ELECTRIC COMPANY, INC.

919-215-9245

Electrical Contractor's Company Name

Telephone

PO BOX 1347 APEX, NC 27502

brandon@tooltimeelectric.com

Address Brandon Orff Owner Tool Time Electric

Email Address I.31034

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

License #

Mechanical Contractor Information: Mechanical Cost \$ 3,000.00

Description of Work INSTALL MINI SPLIT HVAC SYSTEM # Units 1

CAROLINA AIR CONDITIONING COMPANY, INC.

919-683-2421

Mechanical Contractor's Company Name

Telephone

360 SPECTRUM DR. STE 110 KNIGHTDALE, NC 27545

GGP@CAROLINAAC.COM

Address Garrett Page Vice President Carolina Air Cond. Co.

Email Address L.22084 (CLASS 1)

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

License #

Plumbing Contractor Information: Plumbing Cost \$ 2,000.00

Description of Work INSTALL ADA SINK AND TOILET # Baths 1

ALL-MAX PLUMBING

919-678-0111

Plumbing Contractor's Company Name

Telephone

2428 RELIANCE AVENUE APEX, NC 27593

vicky@all-maxplumbing.com

Address UWE Schlueter Owner All Max Plumbing

Email Address L.29022 (CLASS 1)

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

License #

Insulation Contractor Information

TATUM INSULATION, INC.

910-862-5958

Insulation Contractor's Company Name & Address

Telephone

*NOTE: General Contractor must fill out and sign the second page of this application

Sprinkler Contractor Information

NA
 Sprinkler Contractor's Company Name _____ Telephone _____
 Address _____ Email Address _____
 Signature of Officer(s) of Corporation _____ License # _____

Fire Alarm Contractor Information

NA
 Fire Alarm Contractor's Company Name _____ Telephone _____
 Address _____ Email Address _____
 Signature of Officer(s) of Corporation _____ License # _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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 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 charged at full price per current fee schedule.

Brad Nelson Raleigh Division President Davidson Homes, LLC
 Signature of Owner/Contractor/Officer(s) of Corporation _____ Date 03/07/2023

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: Brad Nelson DAVIDSON HOMES RALEIGH DIVISION PRESIDENT Date: 03/07/2023