

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: D.R. Horton Inc./ Jennifer Upchurch	Date 1/29/25	
Site Address: 31 Red Cedar Way	09/ 327 9357	
144	Lot 204	
Description of Proposed Work: New Single Family Dwelling		
General Contractor Informat		
D.R. Horton Inc.	984-327-8357	
Building Contractor's Company Name	Telephone	
2000 Aerial Center Pkwy Ste. 110-A Morrisville, NC 27560	jnupchurch@drhorton.com	
Address	Email Address	
29676 HEATED SQ FT 2,824 GARAGE	SQ FT 411	
License #		
Description of Work New Single Family Dwelling Service Siz	<u>ution</u> te: <sup>200</sup> _Amps T-Pole:	
ImperialElectric	919-363-7474	
Electrical Contractor's Company Name	Telephone	
416 Upchurch St. Apex, NC 27502	office@imperial-electricinc.com	
Address	Email Address	
19850L	Z.maii / Idaross	
License #		
Mechanical/HVAC Contractor Info	ormation_	
Description of Work New Single Family Dwelling		
Romanoff Heating & Cooling	919-848-4652	
Mechanical Contractor's Company Name	Telephone	
3006 Industrial Drive Ste. 120, Raleigh NC 27609	jarmstrong@romanoffgroup.cc	
Address	Email Address	
22375		
License #		
Plumbing Contractor Informa		
Description of Work New Single Family Dwelling	# Baths <u>2.5</u>	
Weather Master	919-266-4415	
Plumbing Contractor's Company Name	Telephone	
305 Village Dr. Knightdale, NC 27545	krollins@weathermasterhvac.com	
Address	Email Address	
17326		
License #  Insulation Contractor Informa	ation	
TriCity Insulation 7204 Becky Circle, Raleigh NC 27615	919-790-9684	
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 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.

Jennifer Upchurch Signature of Owner/Contractor/Office	r(s) of Corporation	1/29/25 Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
General Contractor	_OwnerX	Officer/Agent of the Co	ntractor 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:				
X 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:		Permit Coordinator	_ Date: 1/29/25	
<u>Jenniter Openaren</u>				