

Application #

PRP 007

* 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: DAVIDSON HOMES, LLC		Date	10/25/21
Site Address: TBD PRINCE PLACE DRIVE	Phone	_984-	217-8561
Subdivision: PRINCE PLACE	Lot	7	
Description of Proposed Work: NEW SINGLE FAMILY RESIDENTIAL	_ Total Job Cost	\$285	,610
General Contractor Information			
DAVIDSON HOMES, LLC	<u>256-350-1</u> ;	322	
Building Contractor's Company Name	Telephone		
336 JAMES RECORD ROAD HUNTSVILLE, AL 35824 Address	CHowell@david Email Address	sonhor	nesllc.com
80381 HEATED SQ FT 3297 GARAGE SQ	FT 549		
License #			
<u>Electrical Contractor Information</u> Description of Work <u>NEW SINGLE FAMILY RESIDENTIAL</u> Service Size: _		ole: V	Vec No
IDEAL ELECTRIC	734-927-74		_165100
Electrical Contractor's Company Name	Telephone	40	
PO BOX 969 FARMINGTON, MI 48322	michael.frittelli@	@idoalc	alec com
Address	Email Address	<u>& Iucaic</u>	<u> </u>
<u>U.27098</u> License #			
Mechanical/HVAC Contractor Information	ation		
Description of Work NEW SINGLE FAMILY RESIDENTIAL			
YELLOW DOT HEATING & AIR CONDITIONING	919-754-8686	•	
Mechanical Contractor's Company Name	Telephone		
1203 N. NEW HOPE ROAD RALEIGH, NC 27610	_pkeenan@ydh	vac cor	m
Address	Email Address	VIII.	
L.32872			
License #			
Plumbing Contractor Information	_		
Description of Work NEW SINGLE FAMILY RESIDENTIAL	_# Baths4.5		_
ALL-MAX PLUMBING Plumbing Contractor's Company Name	919-678-0111 Talanhana		
Plumbing Contractor's Company Name	Telephone		
2428 RELIANCE AVENUE APEX, NC 27593 Address	vicky@all-maxp Email Address	<u>lumbin</u>	ıg.com
L.29022 (CLASS 1)	Linaii Addie33		
License #			
Insulation Contractor Information	<u>1</u>		
TATUM INSULATION, INC.	910-862-5958	_	
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.

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10/25/21			
Signature of Owner/Contractor/Officer(s) of Corporation 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.			
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) 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: Davidson Homes Raleigh Division PRESIDENT Date: 10/25/21	_		