

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: MFT DH1 LLC	Date _ <u>12/28/21</u>
Site Address: TBD BLUE MONARCH LANE FUQUAY-VARINA, NC	27526 Phone <u>984-217-8561</u>
Subdivision: PRINCE PLACE	Lot <u>16</u>
Description of Proposed Work: NEW SINGLE FAMILY RESIDENTIAL	Total Job Cost <u>\$246,350</u>
General Contractor Information	<u>1</u>
DAVIDSON HOMES, LLC	256-350-1322
Building Contractor's Company Name	Telephone
_336 JAMES RECORD ROAD HUNTSVILLE, AL 35824 Address	CHowell@davidsonhomesllc.com Email Address
80381 HEATED SQ FT 2483 GARAGE SC	<mark>Q FT</mark> 466
License #	_
<u>Electrical Contractor Informatio</u> Description of Work <u>NEW SINGLE FAMILY RESIDENTIAL</u> Service Size:	
IDEAL ELECTRIC	734-927-7440
Electrical Contractor's Company Name	Telephone
PO BOX 969 FARMINGTON, MI 48322	michael.frittelli@idealelec.com
Address	Email Address
<u>U.27098</u>	
License # Mechanical/HVAC Contractor Inform	aation
	<u>iation</u>
Description of Work NEW SINGLE FAMILY RESIDENTIAL	
VELLOW BOT LIEATING & AID CONDITIONING	010 751 0000
YELLOW DOT HEATING & AIR CONDITIONING Mechanical Contractor's Company Name	919-754-8686 Telephone
Mechanical Contractor's Company Name	Telephone
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address	Telephone _pkeenan@ydhyac.com
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License #	Telephone _pkeenan@ydhvac.com Email Address
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872	Telephone _pkeenan@ydhvac.com Email Address
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Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License # Plumbing Contractor Informatio Description of Work NEW SINGLE FAMILY RESIDENTIAL ALL-MAX PLUMBING	Telephonepkeenan@ydhvac.com Email Address n _# Baths 2.5919-678-0111
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License # Plumbing Contractor Informatio Description of Work _NEW SINGLE FAMILY RESIDENTIAL ALL-MAX PLUMBING Plumbing Contractor's Company Name	Telephonepkeenan@ydhvac.com Email Address n _# Baths2.5
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License # Plumbing Contractor Informatio Description of Work NEW SINGLE FAMILY RESIDENTIAL ALL-MAX PLUMBING Plumbing Contractor's Company Name 2428 RELIANCE AVENUE APEX, NC 27593	Telephonepkeenan@ydhvac.com Email Address n# Baths2.5919-678-0111 Telephonevicky@all-maxplumbing.com
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License # Plumbing Contractor Informatio Description of Work NEW SINGLE FAMILY RESIDENTIAL ALL-MAX PLUMBING Plumbing Contractor's Company Name 2428 RELIANCE AVENUE APEX, NC 27593 Address	Telephonepkeenan@ydhvac.com Email Address n# Baths 2.5919-678-0111 Telephone
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License # Plumbing Contractor Information Description of Work NEW SINGLE FAMILY RESIDENTIAL ALL-MAX PLUMBING Plumbing Contractor's Company Name 2428 RELIANCE AVENUE APEX, NC 27593 Address L.29022 (CLASS 1)	Telephonepkeenan@ydhvac.com Email Address n# Baths2.5919-678-0111 Telephonevicky@all-maxplumbing.com
Mechanical Contractor's Company Name 1203 N. NEW HOPE ROAD RALEIGH, NC 27610 Address L.32872 License # Plumbing Contractor Informatio Description of Work NEW SINGLE FAMILY RESIDENTIAL ALL-MAX PLUMBING Plumbing Contractor's Company Name 2428 RELIANCE AVENUE APEX, NC 27593 Address	Telephonepkeenan@ydhvac.com Email Address n# Baths2.5919-678-0111 Telephonevicky@all-maxplumbing.com Email Address
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*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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I show a	01/10/22	
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 O	fficer/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 PA	ALEIGH DIVISION PRESIDENT Date: 01/10/22	