

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. / Nichelle Karim		Date 06/03/2022
Site Address: 374 Silver Maple Drive	Phone	919-698-5691
Subdivision: Woodgrove	Lot 10	
Description of Proposed Work: New Single Family Dwelling	_ Total Job Cost _	
General Contractor Information		
D. R. Horton, Inc.	919-460-2922	2
Building Contractor's Company Name	Telephone	
2000 Aerial Center Parkway Ste. 110A Morrisville, NC 27560	nskarim@drhorton.com	
Address	Email Address	
29676 HEATED SQ FT 2511 GARAGE SQ	FT 422	
License #		
<u>Electrical Contractor Information</u> Description of Work New Single Family Dwelling Service Size: 2	00 Δmns T-P	ole: YesNo
Imperial Electric	919-363-7474	
Electrical Contractor's Company Name	Telephone	<u>. </u>
837 Perry Road, Apex NC 27502	•	al-electricinc.com
Address	Email Address	
19850L		
License #		
Mechanical/HVAC Contractor Informa	<u>ation</u>	
Description of Work New Single Family Dwelling		
Romanoff Heating & Cooling	919-848-4652	2
Mechanical Contractor's Company Name	Telephone	
3006 Industrial Drive Suite 120, Raleigh NC 27609	jarmstrong@i	romanoffgroup.cc
Address	Email Address	
22375		
License #		
Description of Work New Single Family Dwelling		
	# Baths 3	<u> </u>
Weather Master Physician Control of Company Name	919-266-4415	<u> </u>
- 1)	Telephone	ormoster com
305 Village Drive, Knightdale NC 27545 Address	Email Address	ermaster.com
17326	Email Address	
License #		
Insulation Contractor Information		
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.

Nichelle Karisn	06/03/2022
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Comp	pensation 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 perset forth in the permit:	son(s), firm(s) or corporation(s) performing the work
X Has three (3) or more employees and has obtained	d workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtthem.	tained workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has the covering themselves.	eir own policy of workers' compensation insurance
Has no more than two (2) employees and no subco	ontractors.
While working on the project for which this permit is sough Department issuing the permit may require certificates of to issuance of the permit and at any time during the perm carrying out the work.	coverage of worker's compensation insurance prior
Sign w/Title: Nichelle Karim Permit Co	ordinator Date: 06/03/2022