

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. / Jessica Evans-El	Date 7/29/2022
Site Address: 312 Winterberry Way	Phone 919-280-1025
Subdivision: Woodgrove	Lot 69
Description of Proposed Work: New Single Family Dwelling	
General Contractor Information	
D. R. Horton, Inc.	919-460-2922
Building Contractor's Company Name	Telephone
2000 Aerial Center Parkway Ste. 110A Morrisville, NC 27560	jaevansel@drhorton.com
Address	Email Address
29676 HEATED SQ FT 2820 GARAGE SO) FT 411
License #	
Electrical Contractor Information	
•	200Amps T-Pole: <u>√</u> YesNo 919-363-7474
Imperial Electric Electrical Contractor's Company Name	
837 Perry Road, Apex NC 27502	Telephone office@imperial-electricinc.com
Address	Email Address
19850L	Email Address
License #	
Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work New Single Family Dwelling	
Romanoff Heating & Cooling	919-848-4652
Mechanical Contractor's Company Name	Telephone
3006 Industrial Drive Suite 120, Raleigh NC 27609	jarmstrong@romanoffgroup.cc
Address	Email Address
22375	
License #	
Plumbing Contractor Informatio	<u>n</u>
Description of Work New Single Family Dwelling	_# Baths2.5
Weather Master	919-266-4415
Plumbing Contractor's Company Name	Telephone
305 Village Drive, Knightdale NC 27545	krollins@weathermasterhvac.com
Address	Email Address
17326	
License #	
Insulation Contractor Informatio TriCity Insulation 7204 Becky Circle, Raleigh NC 27615	<u>n</u> 919-790-9684
Insulation Contractor's Company Name & Address	Telephone
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*NOTE: General Contractor / owner must fill out and sign the second page of this application.



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.

7/29/2022

Date

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

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:
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: 7/29/2022