

Application # _____

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

* Must be owner/occupier or licensed contractor. Address,

company name & phone must match information on license.

Owner's Name: DRB Homes NC LLC	Date 6/4/24	
467 Adams Pointe Ct	Phone 919-279-2339	
	Lot 27	
Description of Proposed Work: NSFD	Total Job Cost 284589.00	
General Contractor Inform		
DRB Homes NC LLC	919-279-2339	
Building Contractor's Company Name	Telephone	
1101 Slater Rd. Ste. 300 Durham, NC 27703	amoss@drbgroup.com	
Address	Email Address	
68937 HEATED SQ FT 3511 GARAG	E SQ FT_703	
License #		
Description of Work NSFD <u>Electrical Contractor Information</u> Service Size: <u>220</u> Amps T-Pole: <u>Yes</u> No		
Romanoff Electric	919-848-4652	
Electrical Contractor's Company Name	Telephone	
3006 Industrial Drive Raleigh NC 27609	thoward@romanoffgroup.cc	
Address	Email Address	
U-12915		
License #		
Mechanical/HVAC Contractor In	formation	
Description of Work <u>NSFD</u>		
Weather Master	919-266-4415	
Mechanical Contractor's Company Name	Telephone	
305 Village Drive, Knightdale NC 27545	hill@weathermasterhvac.com	
Address	Email Address	
17326		
License #	action	
Description of Work NSFD		
Description of Work	# Baths 4.5	
<u>C&M Plumbing</u>	919-658-6109	
Plumbing Contractor's Company Name	Telephone	
5427 Hwy US 117 S.Alt., Mount Olive NC 28365 Address	cheryl@cmplumbingseptic.com Email Address	
19887	Email Address	
License #		
Insulation Contractor Information		
Tri-City Insulation 7204 BECKY CIRCLE RALEIGH, NC	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.

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

6/	4/	24
Date		

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:
General Contractor Owner X 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.
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: Date: 6/4/24