

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./ Jennifer Upchurch		Date 6/26/24	
Site Address: 149 Calebs Corner Place	Phone	984-327-8357	
Subdivision: Mason Ridge	Lot 44	<u> </u>	
Description of Proposed Work: New Single Family Dwelling	_ Total Job Cost	192,239	
General Contractor Information			
D.R. Horton Inc.	984-327-835	7	
Building Contractor's Company Name	Telephone		
2000 Aerial Center Pkwy Ste. 110-A Morrisville, NC 27560	jnupchurch@drhorton.com		
Address	Email Address		
29676 HEATED SQ FT 2820 GARAGE SQ	<u>FT</u> 411		
License #			
Electrical Contractor Information Description of Work New Single Family Dwelling Service Size: 200 Amps T-Pole: Yes No			
Imperial Electric	919-363-747		
Electrical Contractor's Company Name	Telephone	<u>-</u>	
416 Upchurch St. Apex, NC 27502	office@imperial-electricinc.com		
Address	Email Address		
19850L	Email / taarooo		
License #			
Mechanical/HVAC Contractor Information			
Description of Work New Single Family Dwelling			
Weather Master	919-266-441	5	
Mechanical Contractor's Company Name	Telephone		
305 Village Dr. Knightdale, NC 27545	krollins@weathermasterhvac.com		
Address	Email Address		
17326			
License #			
Plumbing Contractor Information	<u>1</u>		
Description of Work New Single Family Dwelling	_# Baths		
C&M Plumbing	919-658-6109		
Plumbing Contractor's Company Name	Telephone		
5427 US 117 South Alt. Mt. Olive, NC 28365	annmarie@cmplumbingseptic.com		
Address	Email Address		
L.19887			
License #			
Insulation Contractor Information Prime Energy Group 495 S. High St. Ste. 50 Columbus, OH 43215			
Insulation Contractor's Company Name & Address	Telephone		
insulation Contractor's Company Name & Address	relebrione		

*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 6/26/24 Date		
Affidentifier Werker's Companyation N.C.C.S. 97.44		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
General Contractor OwnerX 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: 6/26/24		
V		