



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

\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: D.R. Horton Inc./ Jennifer Upchurch Date 8/15/24  
Site Address: 57 Black Creek Drive Phone 984-327-8357  
Subdivision: McKay Place Lot 44  
Description of Proposed Work: New Single Family Dwelling Total Job Cost 192,238

**General Contractor Information**

D.R. Horton Inc.

Building Contractor's Company Name

2000 Aerial Center Pkwy Ste. 110-A Morrisville, NC 27560

Address

29676

**HEATED SQ FT** 2,511

**GARAGE SQ FT** 422

License #

Telephone

jnupchurch@drhorton.com

Email Address

**Electrical Contractor Information**

Description of Work New Single Family Dwelling Service Size: 200 Amps T-Pole:  Yes  No

Imperial Electric

919-363-7474

Electrical Contractor's Company Name

416 Upchurch St. Apex, NC 27502

Telephone

office@imperial-electricinc.com

Address

19850L

Email Address

License #

**Mechanical/HVAC Contractor Information**

Description of Work New Single Family Dwelling

Weather Master

919-266-4415

Mechanical Contractor's Company Name

305 Village Dr. Knightdale, NC 27545

Telephone

krollins@weathermasterhvac.com

Address

17326

Email Address

License #

**Plumbing Contractor Information**

Description of Work New Single Family Dwelling # Baths \_\_\_\_\_

Weather Master

919-266-4415

Plumbing Contractor's Company Name

305 Village Dr. Knightdale, NC 27545

Telephone

krollins@weathermasterhvac.com

Address

17326

Email Address

License #

**Insulation Contractor Information**

Prime Energy Group 495 S. High St. Ste. 50 Columbus, OH 43215

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.**

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

8/15/24  
Date

**Affidavit for Worker's Compensation N.C.G.S. 87-14**

The undersigned applicant being the:

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:

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: Jennifer Upchurch Date: 8/15/24