

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

Site Address: 419 Shelby Meadow Lane, Angier NC Subdivision: Honeycutt Hills Description of Proposed Work: NSFD Total Job Cost \$330,903.00 General Contractor Information DRB Homes NC LLC Building Contractor's Company Name 1101 Slater Rd. Ste. 300 Durham, NC 27703 Address 68937 HEATED SQ FT 3415 GARAGE SQ FT 760 License # Electrical Contractor Information Description of Work NSFD Romanoff Electric Electrical Contractor's Company Name 3006 Industrial Drive Raleigh NC 27609 Address Email Address Fall Phone 919-279-2339 Telephone 919-279-2339 Telephone 919-279-2339 Telephone 919-279-2339 Telephone 919-279-2339 Telephone 919-279-2339 Telephone 101 Slater Rd. Ste. 300 Durham, NC 27703 Electrical Contractor Information Phone 919-279-2339 Telephone 919-848-4652 Telephone 102 Telephone 103 Telephone 103 Telephone 104 Telephone 105 Telephone 106 Telephone 107 Telephone 108 Telephone 109 Telephone 10	Owner's Name: DRB Homes NC LLC	Date 10/15/2024
DRB Homes NC LLC Building Contractor's Company Name 1101 Slater Rd. Ste. 300 Durham, NC 27703 Address 68937 License # Description of Work NSFD Romanoff Electric Electrical Contractor Information Electrical Contractor Information Service Size: 220 Amps T-Pole: ✓ Yes No Romanoff Electric Electrical Contractor's Company Name 3006 Industrial Drive Raleigh NC 27609 Total Job Cost \$3330,903.00 919-279-2339 Telephone amoss@drbgroup.com Email Address 6ARAGE SQ FT 760 Service Size: 220 Amps T-Pole: ✓ Yes No Telephone 919-848-4652 Telephone 1006 Industrial Drive Raleigh NC 27609		Phone 919-279-2339
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U-12915	U-12915	
License #	License #	
Mechanical/HVAC Contractor Information		<u>ation</u>
Description of Work NSFD	Description of Work NSFD	
Weather Master 919-266-4415	Weather Master	919-266-4415
Mechanical Contractor's Company Name Telephone	Mechanical Contractor's Company Name	Telephone
305 Village Drive, Knightdale NC 27545 Ihill@weathermasterhvac.com	305 Village Drive, Knightdale NC 27545	Ihill@weathermasterhvac.com
Address Email Address	Address	Email Address
17326		
License #		
Plumbing Contractor Information	Plumbing Contractor Information	<u>n</u>
Description of Work NSFD # Baths 3.5	Description of Work NSFD	 -
<u>C&M Plumbing</u> 919-658-6109	C&M Plumbing	919-658-6109
Plumbing Contractor's Company Name Telephone	Plumbing Contractor's Company Name	Telephone
	5427 Hwy US 117 S.Alt., Mount Olive NC 28365	cheryl@cmplumbingseptic.com
Address Email Address		Email Address
19887		
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 10/15/2024 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:		
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: Date:		