

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

licensed contractor. Address, company name & phone must match information on license.

* Must be owner/occupier or

Application for Residential Building and Trades Permit

Owner's Name:D.R. Horton Inc./ Jennifer Upchurch	Date 11/7/24
Site Address: 120 Fair Child Road	Phone 984-327-8357
Subdivision: Mason Ridge	
Description of Proposed Work: <u>New Single Family Dwelling</u>	Total Job Cost 195,016
General Contractor Information	
D.R. Horton Inc.	984-327-8357
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 1764 GARAGE SC) FT 425
License #	
Electrical Contractor Information Description of Work New Single Family Dwelling Service Size: 200 Amps T-Pole: Yes No	
Imperial Electric	200 Amps 1-Pole: ▼ YesNo 919-363-7474
Electrical Contractor's Company Name	Telephone
416 Upchurch St. Apex, NC 27502	office@imperial-electricinc.com
Address	Email Address
19850L	
License #	
Mechanical/HVAC Contractor Inform	ation
Description of Work New Single Family Dwelling	
Weather Master	919-266-4415
Mechanical Contractor's Company Name	Telephone
305 Village Dr. Knightdale, NC 27545	krollins@weathermasterhvac.com
Address	Email Address
17326	
License #	_
Plumbing Contractor Information	
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 L.19887	Email Address
License #	
Insulation Contractor Information	n
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.

11/7/24 Date

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

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: 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. Permit Coordinator Sign w/Title: Jennifer Upchurch Date: 11/7/24