

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: DRB Homes- NC LLC	Date 03/13/2025	
Site Address: 516 Winding Creek Drive Photo	ne 919-279-2339	
Subdivision: The Farm @ Neill's Creek Lot		
Description of Proposed Work: New Singel Family Dwelling Total Job Co	ost \$203,031.00	
General Contractor Information		
DRB Homes- NC LLC 919-279-23	339	
Building Contractor's Company Name Telephone	Telephone	
1101 Slater Rd. Ste. 300 Durham, NC 27703 amoss@di	rbgroup.com	
Address Email Addres	SS	
68937 HEATED SQ FT GARAGE SQ FT		
License #		
Description of Work New Singel Family Dwelling Service Size: 200 Amps	T Polo: 1 / Voc. No.	
040.047		
MSF Electric, Inc. 919-217-9 Electrical Contractor's Company Name Telephone	9/0/	
	foloatria aam	
	<u>jimw@msfelectric.com</u> Email Address	
U.34688		
License #		
Mechanical/HVAC Contractor Information		
Description of Work New Singel Family Dwelling		
Weather Master 919-266-	-4415	
Mechanical Contractor's Company Name Telephone		
305 Village Drive, Knightdale NC 27545 krollins@w	eathermasterhvac.com	
Address Email Addres	SS	
17326		
License #		
Plumbing Contractor Information		
Description of Work New Single Family Dwelling # Baths 2.5		
Romanoff Plumbing 919-848-		
Plumbing Contractor's Company Name Telephone		
	r@romanoffgroup.com	
Address Email Addres	SS	
29022		
License # Insulation Contractor Information		
Tri-City Insulation 7204 Becky Circle, Raleigh NC 27615 919-790	L068 <i>1</i>	
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.

Ally Woss Signature of Owner/Contractor/Officer(s) of Corporation	03/13/2025	
Signature of Owner/Contractor/Officer(s) of Corporation	Date	
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:		
General Contractor OwnerX_ Off	icer/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: Ally Moss	Date: 03/13/2025	
V		