

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 <u>03/20/2025</u>
07 A	Phone <u>919-279-2339</u>
TI E ON W O	Lot 182
Description of Proposed Work: New Singel Family Dwelling	
General Contractor Inform	
DRB Homes- NC LLC	919-279-2339
Building Contractor's Company Name	Telephone
1101 Slater Rd. Ste. 300 Durham, NC 27703	amoss@drbgroup.com
Address	Email Address
68937 HEATED SQ FT 2197 GARAG	GE SQ FT 417
License #	
Description of Work New Singel Family Dwelling Service S	<u>mation</u> Size: <u>200</u> Amps T-Pole: <mark>√</mark> YesNo
MSF Electric, Inc. Electrical Contractor's Company Name	919-217-9767 Telephone
	•
2009 Eaglerock Road, Wendell NC 27591 Address	<u>jimw@msfelectric.com</u> Email Address
U.34688	Ziliaii / ladi oss
License #	
Mechanical/HVAC Contractor I	<u>nformation</u>
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@weathermasterhvac.com
Address	Email Address
17326	
License #	
Plumbing Contractor Inform	
Description of Work New Single Family Dwelling	# Baths 2.5
Romanoff Plumbing	919-848-4652
Plumbing Contractor's Company Name	Telephone
3006 Industrial Drive, Raleigh NC 27609	<u>uschlueter@romanoffgrou</u> p.com
Address	Email Address
29022	
License # Insulation Contractor Information	mation
Tri-City Insulation 7204 Becky Circle, Raleigh NC 27615	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.

Ally Moss	03/20/2025	
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 OwnerXO	fficer/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 obtain them.	ned workers' compensation insurance to cover	
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 Department issuing the permit may require certificates of co to issuance of the permit and at any time during the permitted carrying out the work.	overage of worker's compensation insurance prior	
Sign w/Title: Ally Moss	Date: 03/20/2025	