



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 PermitOwner's Name: DRP SOLARIS D, LLC Date 04/21/2025Site Address: TBD PRIMING WAY, ANGIER, NC 24501 Phone (252) 283-2036Subdivision: TOBACCO ROAD Lot 79Description of Proposed Work: NEW SINGLE FAMILY RESIDENTIAL Total Job Cost \$293,510**General Contractor Information**DAVIDSON HOMES, LLC (252) 283-2036

Building Contractor's Company Name Telephone

336 JAMES RECORD ROAD HUNTSVILLE, AL 35824 ralpermitting@davidsonhomes.com

Address Email Address

80381 HEATED SQ FT 3428 GARAGE SQ FT 663

License #

Electrical Contractor InformationDescription of Work NEW SINGLE FAMILY RESIDENTIAL Service Size: 200 Amps T-Pole: X Yes ___ NoTOOL TIME ELECTRIC COMPANY, INC. 919-215-9245

Electrical Contractor's Company Name Telephone

PO BOX 1347 APEX, NC 27502 brandon@tooltimeelectric.com

Address Email Address

I.31034

License #

Mechanical/HVAC Contractor InformationDescription of Work NEW SINGLE FAMILY RESIDENTIALYELLOW DOT HEATING & AIR CONDITIONING 919-754-8686

Mechanical Contractor's Company Name Telephone

1203 N. NEW HOPE ROAD RALEIGH, NC 27610 pkeen@ydhvac.com

Address Email Address

L.32872

License #

Plumbing Contractor InformationDescription of Work NEW SINGLE FAMILY RESIDENTIAL # Baths 3.5EVANS PLUMBING 919-772-9133

Plumbing Contractor's Company Name Telephone

102 SIGMA DRIVE GARNER, NC 27529 service@evansplumbing.net

Address Email Address

L.07035

License #

Insulation Contractor InformationTATUM INSULATION, INC. 910-862-5958

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

04/21/2025

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:

DAVIDSON HOMES RALEIGH DIVISION PRESIDENT

Date: 04/21/2025