

Application # _____

Harnett County Central Permitting		
420 McKinney Pkwy Lillington, NC 27546		
PO Box 65 Lillington, NC 27546		
910-893-7525 ext. 1 Fax 9	10-893-2793 www.harnett.org/permits	

Application for Residential Building and Trades Permit

* Must be owner/occupier or licensed contractor. Address, company name & phone must

match information on license.

Owner's Name:D.R. Horton Inc./ Jennifer Upchurch	Date 4/25/25
Site Address: 191 Gilmer Street	Phone 984-327-8357
Subdivision: Eagle Creek	Lot 113
Description of Proposed Work: <u>New Single Family Dwelling</u>	Total Job Cost <u>194,010</u>
General Contractor Information	<u>on</u>
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
	<mark>SQ FT</mark> 399
License #	
Electrical Contractor Information of Work New Single Family Dwelling Service Size	lon :: 200Amps T-Pole: ✓_YesNo
Imperial Electric	919-363-7474
Electrical Contractor's Company Name	Telephone
416 Upchurch St. Apex, NC 27502	office@imperial-electricinc.com
Address	Email Address
1001033	
19850L	
19850L _icense #	
19850L License # <u>Mechanical/HVAC Contractor Infor</u>	
19850L _icense #	
19850L License # <u>Mechanical/HVAC Contractor Infor</u>	
19850L License # Description of Work <u>New Single Family Dwelling</u>	mation 919-550-7711 Telephone
19850L License # Description of Work New Single Family Dwelling Carolina Comfort Air	<u>mation</u> 919-550-7711
<u>Mechanical/HVAC Contractor Infor</u> Description of Work New Single Family Dwelling Carolina Comfort Air Mechanical Contractor's Company Name 703 N. Clinton Ave., Dunn 28334 Address	mation 919-550-7711 Telephone
19850L License # Description of Work New Single Family Dwelling Carolina Comfort Air Mechanical Contractor's Company Name 703 N. Clinton Ave., Dunn 28334 Address 29077	<u>mation</u> 919-550-7711 Telephone RNC_Permits@carolinacomfortai
<u>Mechanical/HVAC Contractor Infor</u> Description of Work <u>New Single Family Dwelling</u> Carolina Comfort Air Mechanical Contractor's Company Name 703 N. Clinton Ave., Dunn 28334 Address 29077 License #	mation 919-550-7711 Telephone RNC_Permits@carolinacomfortai Email Address
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19850L License # Description of Work New Single Family Dwelling Carolina Comfort Air Mechanical Contractor's Company Name 703 N. Clinton Ave., Dunn 28334 Address 29077 License # Plumbing Contractor Informati Description of Work New Single Family Dwelling Carolina Contractor's Company Name 5427 US 117 South Alt. Mt. Olive, NC 28365	mation 919-550-7711 Telephone RNC_Permits@carolinacomfortai Email Address ion # Baths 919-658-6109 Telephone annmarie@cmplumbingseptic.com
19850L License # Mechanical/HVAC Contractor Infor Description of Work New Single Family Dwelling Carolina Comfort Air Mechanical Contractor's Company Name 703 N. Clinton Ave., Dunn 28334 Address 29077 License # Plumbing Contractor Informat Description of Work New Single Family Dwelling C&M Plumbing Plumbing Contractor's Company Name 5427 US 117 South Alt. Mt. Olive, NC 28365 Address	mation 919-550-7711 Telephone <u>RNC_Permits@carolinacomfortai</u> Email Address ion # Baths 919-658-6109 Telephone
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<u>Mechanical/HVAC Contractor Infor</u> Description of Work <u>New Single Family Dwelling</u> Carolina Comfort Air Mechanical Contractor's Company Name 703 N. Clinton Ave., Dunn 28334 Address 29077 .icense # <u>Plumbing Contractor Informat</u> Description of Work <u>New Single Family Dwelling</u> C&M Plumbing Plumbing Contractor's Company Name 5427 US 117 South Alt. Mt. Olive, NC 28365 Address L.19887 .icense #	mation 919-550-7711 Telephone RNC_Permits@carolinacomfortai Email Address ion # Baths 919-658-6109 Telephone annmarie@cmplumbingseptic.com Email Address
19850L 	mation 919-550-7711 Telephone RNC_Permits@carolinacomfortai Email Address ion # Baths 919-658-6109 Telephone annmarie@cmplumbingseptic.com Email Address

*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.

4/25/25

<u>Jennifer Upchurch</u> 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 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: 4/25/25