

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 06/24/205		
	Phone 919-279-2339		
Subdivision: The Farm @ Neill's Creek	Lot 163		
Description of Proposed Work: New Singel Family Dwelling			
General Contractor Information	on		
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 2207 GARAGE S	SQ FT 394		
License #			
Description of Work New Singel Family Dwelling Service Size	on		
	: <u>200</u> Amps T-Pole: <u>V</u> 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		
	Email Address		
Mechanical/HVAC Contractor Infor	mation		
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 Information	<u>ion</u>		
Description of Work New Single Family Dwelling	# Baths 2		
Romanoff Plumbing	919-848-4652		
Plumbing Contractor's Company Name	Telephone		
3006 Industrial Drive, Raleigh NC 27609	uschlueter@romanoffgroup.com		
Address	Email Address		
29022			
License #	_		
Insulation Contractor Informat	<u>ion</u>		
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			06/24/20	5		
Ally Moss Signature of Owner/Contractor/Office	er(s) of Corpor	ration	Date		<del></del>	
Affidavit for Worker's Compensation N.C.G.S. 87-14						
The undersigned applicant being the	ə:					
General Contractor	Owner	X	Officer/Agent of the Cor	ntractor	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:_	06/24/205	
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