



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: D.R. Horton Inc./ Jennifer Upchurch Date 10/7/25Site Address: 45 Mercer Way Phone 984-327-8357Subdivision: Cross Creek Lot 26Description of Proposed Work: New Single Family Dwelling Total Job Cost 164,382**General Contractor Information**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

29676 HEATED SQ FT 2511 GARAGE SQ FT 422

License # _____

Electrical Contractor InformationDescription of Work New Single Family Dwelling Service Size: 200 Amps T-Pole: ☒ Yes ☐ NoCarolina Electric Residential, LLC 919-363-7474

Electrical Contractor's Company Name Telephone

510 Upchurch St. Ste. 2 Apex, NC 27502 lpiccolino@carolinaelectricresidential.com

Address Email Address

19850L

License # _____

Mechanical/HVAC Contractor InformationDescription of Work New Single Family DwellingCarolina Comfort Air 919-550-7711

Mechanical Contractor's Company Name Telephone

703 N. Clinton Ave., Dunn 28334 RNC_Permits@carolinacomfortair.com

Address Email Address

29077

License # _____

Plumbing Contractor InformationDescription of Work New Single Family Dwelling # Baths _____C&M Plumbing 919-658-6109

Plumbing Contractor's Company Name Telephone

5427 US 117 South Alt. Mt. Olive, NC 28365 annmarie@cmplumbingseptic.com

Address Email Address

L.19887

License # _____

Insulation Contractor InformationTatum Insulation II, Inc. 519 Old Drugstore Rd. Garner NC 27529 919-661-0999

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.

Jennifer Upchurch
Signature of Owner/Contractor/Officer(s) of Corporation

10/7/25
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

The undersigned applicant being the:

 General Contractor Owner X 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: Jennifer Upchurch Permit Coordinator Date: 10/7/25