

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: DRP MULTISTATE D, LLC	Date 10/22/2025
Site Address: 62 CHARRED OAK COURT, LILLINGTON, NC 2754	46 Phone (252) 283-2036
Subdivision: WELLERS KNOLL	Lot _8
Description of Proposed Work: NEW SINGLE FAMILY RESIDENTIAL	Total Job Cost \$170,870
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 1917 GARAGE SQ	FT 424
License #	
<u>Electrical Contractor Information</u> Description of Work <u>NEW SINGLE FAMILY RESIDENTIAL</u> Service Size:	
· · · · · · · · · · · · · · · · · · ·	
TOOL TIME ELECTRIC COMPANY, INC. Electrical Contractor's Company Name	919-215-9245 Telephone
	brandon@tooltimeelectric.com
PO Box 1347 APEX, NC 27502 Address	Email Address
I.31034	Ziliali / laarooo
License #	
Mechanical/HVAC Contractor Information	ation
Description of Work NEW SINGLE FAMILY RESIDENTIAL	
CAROLINA AIR CONDITIONING COMPANY, INC.	919-683-2421
Mechanical Contractor's Company Name	Telephone
360 SPECTRUM DR. STE 110 KNIGHTDALE, NC 27545	KDD@CAROLINAAC.COM
Address	Email Address
L.37286 (CLASS 1)	
License #	
Plumbing Contractor Information	<u>1</u>
Description of Work NEW SINGLE FAMILY RESIDENTIAL	_# Baths_
ROMANOFF PLUMBING	919-678-0111
Plumbing Contractor's Company Name	Telephone
2428 RELIANCE AVENUE APEX, NC 27593	uwe@romanoffplumbing.com
Address	Email Address
L.29022 (CLASS 1)	
License #	_
Insulation Contractor Information	<del>-</del>
TATUM INSULATION, INC. Insulation Contractor's Company Name & Address	910-862-5958 Telephone
Insulation Contractor's Company Name & Address	reiephone

\*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.

10/22/2025	
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:	
X 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.	
X 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: 10/22/2025	