Application #
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## **Harnett County Central Permitting**

Mailing Address - PO Box 65 Lillington, NC 27546 – Physical Address – 420 McKinney PKWY Lillington NC 27546
Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure:	Mattamy Homes LL	<u>.C</u> Phone	e: <u>919-233-38</u>	386	
Owner (s) Mailing Address:	raleigh_planrevie	w@mattamycorp	.com		
Land Owner Name (s):	Mattamy Homes LL	<u>.C</u> P	hone: 919	9-233-3886	
Construction or Site Address:	72 Scarlet	Sage Dr			
PIN #0654-26-5993.00	0 Parcel #	080654	0034 14		
Job Cost (Required): \$926	3.80 Description	of Work to be do	one <u>Plu</u>	ımbing	
Mechanical: New Unit With I	Ductwork New U	nit Without Ductw	ork Gas Pi	ping Other	
Electrical*: 200 Amp < * For Progress I	200 Amp Service Energy customers we			t Other	
Plumbing: yes Water/Sewer	Tap Number	of Baths <u>2.5</u>	Water Heat	er _yes	
Specific Directions to Job from					
Subdivision: Bloom	Lot #:14				
I A. Maynor Plumbing	will prov	vide the	Plumbing	labor on this	
structure. (Contractors Name)		(Trade)			
I am the building owner or my	NC state license num	ber is <u>12309</u>		_, which entitles me to	
perform such work on the abo					
other applicable State and loc	al laws, ordinances ar	nd regulations.			
A.Maynor Plumbing		919-94	3-8820		
Contractor's Company Name			Telephone		
1000 Goodworth Drive, Address	pex NC 27539		Email Address		
12309					
License #	<b>^</b> (				
Structure Owner / Contractor S	Signature:	1600 BJOH		Date: <u>9/3/2025</u>	

By signing this application, you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

\*Company name, address, & phone must match information on license