

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: Mattamy Homes LLC	_ Date1/27/2022
Site Address: 27 Davinhall Dr. Fuquay Varina, NC 27526	Phone <u>9192333886</u>
Subdivision: Providence Creek	Lot <u>93</u>
Description of Proposed Work: Single Family Dwelling	Total Job Cost <u>\$204750.00</u>
General Contractor Info	<u>rmation</u>
Mattamy Homes LLC	9192333886
Building Contractor's Company Name	Telephone
11000 Regency Pkwy Cary, NC 27518 Address	_Raleigh_PlanReview@mattamycorp.com Email Address
49775 HEATED SQ FT 2567	GARAGE SQ FT 421
License #	ation
Description of Work Wiring Electrical Contractor Info	
Imperial Electric Inc.	9193637474
Electrical Contractor's Company Name	Telephone
837 Perry Rd Apex, NC 27502	campomizzi@mindspring.com
Address	Email Address
L19850	
License # Mechanical/HVAC Contractor	Information
Description of Work HVAC System	
A. Maynor Heating & Air Conditioning Inc.	
Mechanical Contractor's Company Name	Telephone
1094 Classic Road Apex, NC 27539 Address	Email Address
	Email Address
<u>L12309</u> License #	
Plumbing Contractor Info	<u>ormation</u>
Description of Work Plumbing	# Baths3
Barbour & Pourron Plumbing Inc	9195334455
Plumbing Contractor's Company Name	Telephone
PO Box 934 Clayton, NC 27528	
Address	Email Address
<u>L27132</u> License #	
Insulation Contractor Info	ormation
Live Green Inc. 5001 Old Poole Rd Raleigh, NC 27610	9194536411
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.	
Signature of Owner/Contractor/Officer(s) of Corporation 1/27/2022 Date	
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 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.	
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:	