

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	Date _	4/13/2022		
Site Address: Davi	nhall Dr Fuquay Varina, NC 27526	Phone	9192333886	<u>; </u>	
Subdivision: Providen	ce Creek		Lot	94	
Description of Proposed	Work: Single Family Dwelling		Total Job Cos	st <u>\$220,802.40</u>	
	General Contractor Infor	mation			
Mattamy Homes LL	.C		9192333886		
Building Contractor's Company Name		Telephone			
11000 Regency Pkwy Cary, NC 27518 Address		_Raleigh_PlanReview@mattamycorp.com Email Address			
49775	HEATED SQ FT 2339	GARAGE	SQ FT 45	58	
License #					
Description of Work \	<u>Electrical Contractor Info</u> <u>Niring</u> Service			ole: ves Yes No	
Ideal Electric			27-7440		
Electrical Contractor's Co	ompany Name		Telephone		
2436 South Miami Blvd	d Durham, NC 27703	colleen	.heinrich@ide	alelec.com	
Address		Email Address			
27098					
License #	Mechanical/HVAC Contractor	Informa	ition		
Description of Work	HVAC System		<u></u>		
•	·				
A. Maynor Heating & Air Conditioning Inc.			196832421		
Mechanical Contractor's Company Name			Telephone		
1094 Classic Road Apex, NC 27539 Address			Email Address		
			Elliali Address	5	
35139 License #					
	Plumbing Contractor Info	rmation			
Description of Work	Plumbing		# Baths	2	
Barbour & Pourron Plumbing Inc		9195334	4455		
Plumbing Contractor's Company Name			Telephone		
PO Box 934 Clayto	n, NC 27528				
Address			Email Address	S	
L27132					
License #	Insulation Contractor Info	rmation	1		
Live Green Inc. 500	1 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.

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EXPIRED PERMIT FEES - 6 Months to 2 years permit re-	ssue fee is \$150.00. After 2 years re-issue fee
is as per current fee schedule.	
A	
Signature of Owner/Contractor/Officer(s) of Corporation	4/13/2022
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Comp	ensation N.C.G.S. 87-14
The undersigned applicant being the:	
General Contractor Owner (Officer/Agent of the Contractor or Owner
Outeral outstands	omoci/rigonic of the contractor of cwiler
Do hereby confirm under penalties of perjury that the personal transfer is the personal transfer in the personal transfer	on(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 obtathem.	ained workers' compensation insurance to cover
ulom.	
Has one (1) or more subcontractors(s) who has the	ir own policy of workers' compensation insurance
covering themselves.	
Has no more than two (2) employees and no subco	ntractors.
While working on the project for which this permit is sough Department issuing the permit may require certificates of o	
to issuance of the permit and at any time during the permit	
carrying out the work.	
Sign w/Title:	Date: