

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 <u>5/23/2022</u>	
Site Address: Hartford Lane, Fuquay Varina NC 27526	Phone <u>9192333886</u>	
Subdivision: Providence Creek	Lot	
Description of Proposed Work: Single Family Dwelling		
General Contractor Infor	mation	
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 #		
Description of Work Wiring Electrical Contractor Info		
	734-927-7440	
Electrical Contractor's Company Name	Telephone	
• •	colleen.heinrich@idealelec.com	
Address	Email Address	
27098		
License #		
Mechanical/HVAC Contractor		
Description of Work HVAC System		
A. Maynor Heating & Air Conditioning Inc.	9196832421	
Mechanical Contractor's Company Name	Telephone	
1094 Classic Road Apex, NC 27539		
Address	Email Address	
35139		
License # Plumbing Contractor Info	rmation	
Description of Work Plumbing		
	9195334455	
Plumbing Contractor's Company Name	Telephone	
PO Box 934 Clayton, NC 27528		
Address	Email Address	
L27132		
License # Insulation Contractor Information		
<u>Live Green Inc.</u> 5001 Old Poole Rd Raleigh, NC 27610 Insulation Contractor's Company Name & Address	9194536411 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	-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	5/23/2022
Signature of Owner/Contractor/Officer(s) of Corporation	Date
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Affidavit for Worker's Com	pagestion N.C.G.S. 87-14
The undersigned applicant being the:	pensation 14.0.0.0. 07-14
General Contractor Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the per-	son(s) firm(s) or corporation(s) performing the work
set forth in the permit:	con(c), min(c) or corporation(c) performing the work
Has three (3) or more employees and has obtaine	d workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has ob	tained workers' compensation insurance to cover
them.	·
Use one (1) or more subsentractors(s) who has th	oir own policy of workers' componentian incurence
Has one (1) or more subcontractors(s) who has th covering themselves.	ell own policy of workers compensation insurance
· ·	
Has no more than two (2) employees and no subc	ontractors.
While working on the project for which this permit is soug	ht 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 perm	itted work from any person, firm or corporation
carrying out the work.	
Sign w/Title:	Date:
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