

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: Matta	my Homes LLC	Date	10/25/	2022		
Site Address: 70 Kingsford Lane, Fuquay Varina NC 2752		27526	Phone	919233	3886	
Subdivision: Providence C	Subdivision: Providence Creek			7	4	
Description of Proposed Work						
·	General Contracto	r Informatio	า			
Mattamy Hamas II C			<del>_</del>	006		
Mattamy Homes LLC Building Contractor's Company Name			9192333886 Telephone			
11000 Regency Pkwy Cary, NC 27518 Raleigh_PlanReview@ma					mattamycorn com	
Address			Email Address			
49775	HEATED SQ FT 2567	GARA	GE SQ FT	421		
License #						
Description of Work Wiring	Electrical Contracto	or Informatio	<u>n</u>	T Polo:	vos Vos No	
Ideal Electric Electrical Contractor's Compa		<u>-927-7440</u> Telephor				
			•			
2436 South Miami Blvd Durham, NC 27703 Address		collee	<u>colleen.heinrich@idealelec.com</u> Email Address			
27098			21110111710	4.000		
License #						
	Mechanical/HVAC Cont	ractor Inforn	<u>nation</u>			
Description of Work	HVAC System					
A. Maynor Heating & Air Conditioning Inc.			91968324	21		
Mechanical Contractor's Company Name			Telephor	ne		
1094 Classic Road Apex, NC 27539						
Address			Email Address			
35139						
License #						
	Plumbing Contracto	or Information	<u>on</u>			
Description of Work	Plumbing		# Baths_	2	2.5	
Barbour & Pourron Plumbing Inc		91953	34455			
Plumbing Contractor's Company Name			Telephor	ne		
PO Box 934 Clayton, NC 27528						
Address			Email Ad	dress		
L27132						
License #	Insulation Contracto	or Informatio	n			
Live Oreen Inc. F004 OL	<u>-</u>			2444		
Live Green Inc. 5001 Old Poole Rd Raleigh, NC 27610 Insulation Contractor's Company Name & Address			9194536 Telephor			



## \*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-iss	sue fee is \$150.00. After 2 years re-issue fee
is as per current fee schedule.	
Signature of Owner/Contractor/Officer(s) of Corporation	10/25/2022
Signature of Owner/Contractor/Onicer(s) of Corporation	Date
Affidavit for Worker's Compe	nsation N.C.G.S. 87-14
The undersigned applicant being the:	
General Contractor Owner Of	fficer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the persor set forth in the permit:	n(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained w	vorkers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtain them.	ned workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance
Has no more than two (2) employees and no subcont	tractors.
While working on the project for which this permit is sought in Department issuing the permit may require certificates of costo issuance of the permit and at any time during the permitted carrying out the work.	verage of worker's compensation insurance prior
Sign w/Title:	Date: