

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 _	10/25	5/2022		
Site Address: 55 Kingsford Lane, Fuquay Varina NC 2752		26	_Phone	919233	33886	
Subdivision: Provi	dence Creek		_Lot	(	66	
Description of Proposed Work: Single Family Dwelling			_ Total Jo	ob Cost _	\$219,710.4	<u> 10</u>
	<b>General Contractor Info</b>	mation				
Mattamy Homes LLC			9192333	3886		
Building Contractor's Company Name			Telepho	ne		
11000 Regency Pkwy Cary, NC 27518 Address			_Raleigh_PlanReview@mattamycorp.com Email Address			
49775	HEATED SQ FT 2324	GARAG	E SQ FT			
License #			-		<del></del>	
Description of Work	Electrical Contractor Info			T Pole:	ves Ves	No
						NO
Ideal Electric Electrical Contractor's	s Company Name	134-	927-7440 Telepho			
		colleer	•		lec com	
Address			leen.heinrich@idealelec.com Email Address			
27098						
License #			4.			
	Mechanical/HVAC Contractor		<u></u>			
Description of Work _	HVAC System					
A. Maynor Heating & Air Conditioning Inc.			91968324	421		
Mechanical Contractor's Company Name			Telepho	ne		
1094 Classic Road Apex, NC 27539						
Address			Email A	ddress		
35139	<u></u>					
License #	Plumbing Contractor Info	rmatior	า			
Description of Work	Plumbing			2	2.5	
-			4455		<u> </u>	
Barbour & Pourron Plumbing Inc Plumbing Contractor's Company Name			Telepho			
PO Box 934 Cla	ayton, NC 27528		•			
Address			Email A	ddress		
L27132						
License #	Insulation Contractor Info	rmatic:	2			
Live Ones: In-		<u> </u>	<u> </u>	06444		
<u>Live Green Inc.</u> 5001 Old Poole Rd Raleigh, NC 27610 Insulation Contractor's Company Name & Address			919453 Telepho			



## \*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: