

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: Bradley Stancil	Date 7/7/2023	
	Phone (919) 538-5845	
	Lot 19	
Description of Proposed Work: New Single Family Total Jol	b Cost <u>\$279,314</u>	
General Contractor Information		
New Home Inc., LLC (919) 42	22-2838	
Building Contractor's Company Name Telephone		
1611 Jones Franklin Road, STE 101, Raleigh, NC 27606 rich.sherman@newhomeinc.co		
Address Email Ad	dress	
82896 HEATED SQ FT 2784 GARAGE SQ FT 415		
License #		
Electrical Contractor Information		
Description of Work New Single Family Service Size: 200 Amp		
Ideal Electric, Inc. (313) 452-7176		
Electrical Contractor's Company Name Telephone		
PO Box 969, Farmington, MI 48332 michael.frittelli@idealelec		
Address Email Ad	dress	
27098-U		
License #  Mechanical/HVAC Contractor Information		
N 0: 1 = "		
(0.4	10) 204 0002	
A. Maynor Heating & Air Conditioning, Inc. (919) 361-0993		
Mechanical Contractor's Company Name  Telephone		
	naynorservices.com	
Address Email Ad	dress	
12309		
License #  Plumbing Contractor Information		
	3	
Description of Work New Single Family # Baths_		
Barbour and Pourron Plumbing & Service Inc. (919)	553-4455	
Plumbing Contractor's Company Name  Telephor		
PO Box 934, Clayton, NC 27520 jeromy@bpplumbing		
Address Email Ad	dress	
27132		
License # Insulation Contractor Information		
<u> </u>	9) 453-6411	
Insulation Contractor's Company Name & Address  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-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Rich Sherman	7/7/2023	
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 OwnerX	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:		
X 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.		
X 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: Rich Sherman Manager	Date: 7/7/2023	