

Application # \_\_\_\_\_

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

\* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

## Application for Residential Building and Trades Permit

Owner's Name: Bradley Stancil	Date 7/19/2023	
Site Address: 238 Salem Village Dr., Fuquay Varina, NC 27	7526 Phone (919) 538-5845	
Subdivision: <u>Woodbridge South</u>	Lot26	
Description of Proposed Work: New Single Family		
General Contractor Information	<u>1</u>	
New Home Inc., LLC	(919) 422-2838	
Building Contractor's Company Name	Telephone	
1611 Jones Franklin Road, STE 101, Raleigh, NC 27606	rich.sherman@newhomeinc.com	
Address	Email Address	
82896 HEATED SQ FT_2744 GARAGE SC	<b>Q FT</b> 415	
License #		
Electrical Contractor Informatio   Description of Work New Single Family		
	(313) 452-7176	
Ideal Electric, Inc. Electrical Contractor's Company Name	Telephone	
PO Box 969, Farmington, MI 48332	michael.frittelli@idealelec.com	
Address	Email Address	
27098-U		
License #		
Mechanical/HVAC Contractor Inform	nation	
Description of Work New Single Family		
A. Maynor Heating & Air Conditioning, Inc.	(919) 361-0993	
Mechanical Contractor's Company Name	Telephone	
100 Goodworth Drive, Apex, NC 27539	brett@maynorservices.com	
Address	Email Address	
12309		
License # Plumbing Contractor Informatio	n .	
Description of Work New Single Family		
· · · · · · · · · · · · · · · · · · ·		
Barbour and Pourron Plumbing & Service Inc.	<u>(919) 553-4455</u>	
Plumbing Contractor's Company Name PO Box 934, Clayton, NC 27520	Telephone jeromy@bpplumbing.com	
Address	Email Address	
27132		
License #		
Insulation Contractor Information		
LiveGreen Inc., 5001 Old Poole Road, Raleigh, NC 27610	(919) 453-6411	
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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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

7/19/2023

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 Owner 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 v set forth in the permit:	vork	
<u>X</u> Has three (3) or more employees and has obtained workers' compensation insurance to cover the	m.	
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.	ər	
X Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insuran covering themselves.	се	
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 Sharman Manager		