

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 _	7/19/2	2023		
Site Address: Cottonseed Lane, Fuquay Varina NC 2752	6	_Phone	9192333	3886	
Subdivision: Providence Creek		Lot	1	9	
Description of Proposed Work: Single Family Dwelling		_ Total Jo	b Cost _	\$251,669	9.60
General Contractor Info	rmation				
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 2795	GARAGI	E SQ FT	<u>460</u>		
License # Electrical Contractor Info	ormation	•			
Description of Work Wiring Service			T-Pole:	<u>yes</u> Yes_	_No
Ideal Electric	734-9	927-7440			
Electrical Contractor's Company Name		Telepho	ne		
2436 South Miami Blvd Durham, NC 27703	colleen			ec.com_	
Address		Email Address			
27098					
License # Mechanical/HVAC Contracto	r Informa	ation			
Description of Work HVAC System					
			121		
Mechanical Contractor's Company Name	Telephone				
1094 Classic Road Apex, NC 27539		•			
Address		Email Ad	ddress		
35139					
License # Plumbing Contractor Info	ormation				
· · · · · · · · · · · · · · · · · · ·		_	2		
Description of Work Plumbing		_	3		
Barbour & Pourron Plumbing Inc Plumbing Contractor's Company Name	919533	<u>4455</u> Telepho	ne		
		ГСІСРПО			
PO Box 934 Clayton, NC 27528 Address		Email Address			
L27132					
License #					
Insulation Contractor Inf	<u>ormatior</u>	<u>1</u>			
Live Green Inc. 5001 Old Poole Rd Raleigh, NC 27610	_	919453			
Insulation Contractor's Company Name & Address		Telepho	ne		



*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 is as per current fee schedule.	fee
is as per current ree scriedule.	
Andrew Broke 7/19/2023	
Signature of Owner/Contractor/Officer(s) of Corporation 7/19/2023 Date	
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 set forth in the permit:	ne work
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 compensation them.	cover
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insucovering themselves.	ırance
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 insurant to issuance of the permit and at any time during the permitted work from any person, firm or corporationarying out the work.	ce prior
Sign w/Title: Date:	