

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

Site Address: 338 Yates Mill Drive, Fuquay Varina, NC 27526 Phone (919) 538-5845 Subdivision: Woodbridge South Lot 9 Description of Proposed Work: New Single Family Total Job Cost \$266,733 Mew Home Inc., LLC (919) 422-2838 Building Contractor's Company Name Telephone	Owner's Name: Bradley Stancil	Date 11/27/2023	
Subdivision: Woodbridge South Lot 9 Description of Proposed Work: New Single Family Total Job Cost \$266,733 General Contractor Information 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	Site Address: 338 Yates Mill Drive, Fuquay Varina, NC 2752	26 Phone (919) 538-5845	
Description of Proposed Work: New Single Family General Contractor Information New Home Inc., LLC Building Contractor's Company Name 1611 Jones Franklin Road, STE 101, Raleigh, NC 27606 Total Job Cost\$266,733 (919) 422-2838 Telephone rich.sherman@newhomeinc.com			
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	Building Contractor's Company Name	Telephone	
Address Email Address	1611 Jones Franklin Road, STE 101, Raleigh, NC 27606	rich.sherman@newhomeinc.com	
	Address	Email Address	
82896 HEATED SQ FT_2460 GARAGE SQ FT_437_	82896 HEATED SQ FT 2460 GARAGE SQ	FT 437_	
License #			
Electrical Contractor Information Pagaription of Work New Circula Familia Service Size: 200 Amps. T Polo: V. Vos. No.			
Description of Work New Single Family Service Size: 200 Amps T-Pole: X Yes No			
<u>Ideal Electric, Inc.</u> (313) 452-7176 Electrical Contractor's Company Name Telephone	Ideal Electric, Inc.		
	. ,	michael.frittelli@idealelec.com	
PO Box 969, Farmington, MI 48332 michael.frittelli@idealelec.com Address Email Address			
27098-U		Liliali Address	
License #			
Mechanical/HVAC Contractor Information			
Description of Work New Single Family	Description of Work New Single Family		
A. Maynor Heating & Air Conditioning, Inc. (919) 361-0993		(919) 361-0993	
Mechanical Contractor's Company Name Telephone		Telephone	
100 Goodworth Drive, Apex, NC 27539 brett@maynorservices.com	100 Goodworth Drive, Apex, NC 27539	brett@maynorservices.com	
Address Email Address		Email Address	
12309	12309		
License #			
Plumbing Contractor Information			
Description of Work New Single Family # Baths 2.5	Description of Work New Single Family	_# Baths2.5	
Barbour and Pourron Plumbing & Service Inc. (919) 553-4455	Barbour and Pourron Plumbing & Service Inc.	(919) 553-4455	
Plumbing Contractor's Company Name Telephone	Plumbing Contractor's Company Name	Telephone	
PO Box 934, Clayton, NC 27520 jeromy@bpplumbing.com	PO Box 934, Clayton, NC 27520	jeromy@bpplumbing.com	
Address Email Address		Email Address	
27132			
License #			
Insulation Contractor Information (040) 453 0444			
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 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	11/27/2023	
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 0	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.		
\underline{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: 11/27/2023	