

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 _	10/31/2023	<u> </u>	
Site Address: 220 Davinhall Drive, Fuquay Varina NC 275	526	Phone <u>9192</u>	2333886	
Subdivision: Providence Creek		Lot	17	
Description of Proposed Work: Single Family Dwelling		_Total Job Cos	st\$220,802.40	
General Contractor Info	mation			
Mattamy Homes LLC 9192333886				
Building Contractor's Company Name	Telephone			
11000 Regency Pkwy Cary, NC 27518	_Raleigh_PlanReview@mattamycorp.com			
Address		Email Address		
49775 HEATED SQ FT2339 License #	GARAGE	SQ FT 45	<u>8</u>	
Electrical Contractor Info				
Description of Work Wiring Service	e Size: _	Amps T-Po	ole: <u>yes</u> Yes <u>N</u> o	
Ideal Electric)27-7440		
Electrical Contractor's Company Name		Telephone		
2436 South Miami Blvd Durham, NC 27703 Address		<u>.heinrich@idea</u> Email Address		
27098		Email / taar ooc	,	
License #				
Mechanical/HVAC Contractor	Informa	ation_		
Description of Work HVAC System				
A. Maynor Heating & Air Conditioning Inc.	9	196832421		
Mechanical Contractor's Company Name		Telephone		
1094 Classic Road Apex, NC 27539			<u></u>	
Address		Email Address	3	
35139				
License # Plumbing Contractor Info	rmation	1		
Description of Work Plumbing		# Baths_	2	
	919533	· ·		
Plumbing Contractor's Company Name		Telephone		
PO Box 934 Clayton, NC 27528			<u></u>	
Address		Email Address	3	
27132				
License # Insulation Contractor Information				
Live Green Inc. 5001 Old Poole Rd Raleigh, NC 27610		<u>•</u> 9194536411		
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.

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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.				
Andrew Brothe	10/31/2023			
Signature of Owner/Contractor/Officer(s) of Corporation	Date			
Affidavit for Worker's Comp	pensation 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 pers set forth in the permit:	son(s), firm(s) or corporation(s) performing the work			
Has three (3) or more employees and has obtained	d workers' compensation insurance to cover them.			
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.				
Has one (1) or more subcontractors(s) who has the covering themselves.	eir own policy of workers' compensation insurance			
Has no more than two (2) employees and no subco	ontractors.			
While working on the project for which this permit is sough Department issuing the permit may require certificates of to issuance of the permit and at any time during the permit carrying out the work.	coverage of worker's compensation insurance prior			
Sign w/Title:	Date:			