

Application #	
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* 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: Ric	ch Sherman	Da	ate 11/30/2023	
Site Address: 21	te Address: 21 Whistling Way Lillington, NC 27546		19) 422-2838	
		Lot		
Description of Propose	d Work: New Single Family		209,314	
	General Contractor In	nformation		
New Home Inc., LLC		(919) 422-2838		
Building Contractor's C	company Name	Telephone		
1611 Jones Franklin	Road, STE 101, Raleigh, NC 276	06 rich.sherman@ne	whomeinc.com	
Address		Email Address		
82896	HEATED SQ FT 2430 G	ARAGE SQ FT 437		
License #				
Description of Monte	Electrical Contractor I		. W. Van Na	
	New Single Family Ser			
<u>Ideal Electric, I</u> Electrical Contractor's		(313) 452-71 Telephone	/6	
	• •	•	Nidoololoo oom	
Address	rmington, MI 48332	michael.frittelli@ Email Address	<u>Jidealelec.com</u>	
27098-U		Email Address		
License #	_			
LICEIISE #	Mechanical/HVAC Contrac	etor Information		
Description of Work	New Single Family			
•	g & Air Conditioning, Inc.	(919) 361-09)93	
Mechanical Contractor		Telephone		
	, ,	•	brett@maynorservices.com	
100 Goodworth Drive, Apex, NC 27539 Address			Email Address	
12309				
License #	_			
	Plumbing Contractor I	<u>nformation</u>		
Description of Work	New Single Family	# Baths 2.5		
Barbour and Po	urron Plumbing & Service Inc.	(919) 553-4455	5	
Plumbing Contractor's Company Name		Telephone	 	
PO Box 934, Clayton, NC 27520		jeromy@bpplun	າbing.com	
Address		Email Address		
27132				
License #				
	Insulation Contractor			
LiveGreen Inc., 5001 Old Poole Road, Raleigh, NC 27610			<u> 11 </u>	
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	11/30/2023			
Signature of Owner/Contractor/Officer(s) of Corporation	Date			
Affidavit for Worker's Com The undersigned applicant being the:	pensation N.C.G.S. 87-14			
General Contractor OwnerX	Officer/Agent of the Contractor or Owner			
Do hereby confirm under penalties of perjury that the perset forth in the permit:	son(s), firm(s) or corporation(s) performing the work			
X Has three (3) or more employees and has obtaine	d workers' compensation insurance to cover them.			
Has one (1) or more subcontractors(s) and has obthem.	stained workers' compensation insurance to cover			
\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: 11/30/2023			
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