

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: Br	adley Stancil		Date <u>6/3/2024</u>
	s Mill Drive, Fuquay Varina, NC 27526	Phone	(919) 538-5845
Subdivision: Wood			
	d Work: New Single Family		\$ 302,259
	General Contractor Information		,
New Home Inc., LLC		(919) 422-2838	
Building Contractor's Co	ompany Name	Telephone	
1611 Jones Franklin	Road, STE 101, Raleigh, NC 27606	rich.sherman@newhomeinc.com	
Address		Email Address	
82896	HEATED SQ FT_3044 GARAGE SQ	QFT 757	
License #			
D 1 (1 (1))	Electrical Contractor Information		N 1 N 1 N 1
	New Single Family Service Size:		
Ideal Electric, Ir		(313) 452-7176	
Electrical Contractor's C	Company Name	Telephone	
PO Box 969, Farmington, MI 48332		michael.frittelli@idealelec.com	
Address		Email Address	
27098-U	_		
License #			
	Mechanical/HVAC Contractor Inform	<u>ation</u>	
Description of Work	New Single Family		_
A. Maynor Heating & Air Conditioning, Inc.		(919) 361-0993	
Mechanical Contractor's Company Name		Telephone	
100 Goodworth Driv	ve, Apex, NC 27539	brett@maynorservices.com	
Address		Email Address	-
12309			
License #	_		
	Plumbing Contractor Information	<u>1</u>	
Description of Work	New Single Family	_# Baths3	
Barbour and Pou	ırron Plumbing & Service Inc.	(919) 553-4	455
Plumbing Contractor's Company Name		Telephone	
PO Box 934, Clayton, NC 27520		jeromy@bpplumbing.com	
Address		Email Address	<u> </u>
27132			
License #	_		
	Insulation Contractor Information	<u>n</u>	
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 Signature of Owner/Contractor/Officer(s) of Corporation 6/3/2024 Date				
Affidavit for Worker's Compensation N.C.G.S. 87-14				
The undersigned applicant being the:				
General Contractor OwnerX 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: 6/3/2024				