

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:	Bradley Stancil	Date <u>3/27/202</u> 4
Site Address:	27 Salem Village Drive, Fuquay Varina, NC	27526 Phone (919) 538-5845
Subdivision:	Woodbridge South	Lot <u>41</u>
Description of Pr	roposed Work: New Single Family	Total Job Cost \$282,183
	General Contractor Information	<u>n</u>
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
Address		Email Address
82896	HEATED SQ FT_3017_ GARAGE S	<mark>Q FT_ 469</mark>
License #		
Description of W	Electrical Contractor Information	
Description of Work New Single Family Service Size:		(313) 452-7176
Ideal Electric, Inc. Electrical Contractor's Company Name		Telephone
PO Box 969, Farmington, MI 48332		michael.frittelli@idealelec.com
Address		Email Address
27098-U		
License #		
	Mechanical/HVAC Contractor Inform	<u>nation</u>
Description of W	ork New Single Family	
A. Maynor Heating & Air Conditioning, Inc.		(919) 361-0993
Mechanical Contractor's Company Name		Telephone
100 Goodworth Drive, Apex, NC 27539		brett@maynorservices.com
Address		Email Address
12309		
License #	Plumbing Contractor Information	on.
5	· · · · · · · · · · · · · · · · · · ·	
•	ork New Single Family	# Baths3
Barbour and Pourron Plumbing & Service Inc.		<u>(919) 553-4455</u>
Plumbing Contractor's Company Name		Telephone
PO Box 934, Clayton, NC 27520		jeromy@bpplumbing.com Email Address
Address 27132		Email Address
License #		
LICEIISE #	Insulation Contractor Informati	on
LiveGreen Inc.	, 5001 Old Poole Road, Raleigh, NC 27610	
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 3/27/2024			
Signature of Owner/Contractor/Officer(s) of Corporation Date			
Afficial to the Medical Commence for NO CO 2744			
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.			
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 Sharman Manager Date: 3/27/2024			