

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	Date1/3/2024
Site Address: 158 Denali Drive, Angier NC 27501	Phone <u>9192333886</u>
Subdivision: Riverfall	Lot
Description of Proposed Work: Single Family Dwellin	ng Total Job Cost <u>\$219,710.40</u>
General Contractor In	<u>formation</u>
Mattamy Homes LLC	9192333886
Building Contractor's Company Name	Telephone
11000 Regency Pkwy Cary, NC 27518 Address	_Raleigh_PlanReview@mattamycorp.com Email Address
49775 HEATED SQ FT 2324	GARAGE SQ FT 434
License #	
Description of Work Wiring Electrical Contractor In	
Ideal Electric	734-927-7440
Electrical Contractor's Company Name	Telephone
2436 South Miami Blvd Durham, NC 27703	colleen.heinrich@idealelec.com
Address	Email Address
27098	
License #	tou lufoumotion
Mechanical/HVAC Contract	
Description of WorkHVAC System	
A. Maynor Heating & Air Conditioning Inc.	9196832421
Mechanical Contractor's Company Name	Telephone
1094 Classic Road Apex, NC 27539	
Address	Email Address
35139	
License # Plumbing Contractor In	nformation
Description of Work Plumbing	
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Barbour & Pourron Plumbing Inc Plumbing Contractor's Company Name	9195334455 Telephone
PO Box 934 Clayton, NC 27528	relephene
Address	Email Address
27132	
License #	
Insulation Contractor I	<u>nformation</u>
Live Green Inc. 5001 Old Poole Rd Raleigh, NC 27610	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.

Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:  General Contractor  Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) set forth in the permit:  Has one (1) or more subcontractors(s) who has their own policy of workers' compensation  Afficavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:  Owner  Officer/Agent of the Contractor  Obhereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) set forth in the permit:  Has one (1) or more subcontractors(s) and has obtained workers' compensation in them.  Has one (1) or more subcontractors(s) who has their own policy of workers' compensation in them.	ears re-issue fee
Affidavit for Worker's Compensation N.C.G.S. 87-14  The undersigned applicant being the:  General Contractor Owner Officer/Agent of the Contractor  Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) set forth in the permit:  Has three (3) or more employees and has obtained workers' compensation insura Has one (1) or more subcontractors(s) and has obtained workers' compensation them.	
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Has one (1) or more subcontractors(s) and has obtained workers' compensation them.	performing the work
them.	ance to cover them.
Has one (1) or more subcontractors(s) who has their own policy of workers' comp	nsurance to cover
covering themselves.	ensation insurance
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 Cen Department issuing the permit may require certificates of coverage of worker's compens to issuance of the permit and at any time during the permitted work from any person, first carrying out the work.	ation insurance prior
Sign w/Title: Date:	