

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 _	4/17/2024		
Site Address: 20	Barrow Court, Angier NC 27501	_Phone	9192333886		
Subdivision: Riverfall	1	_Lot	4		
Description of Proposed	Work: Single Family Dwelling		Total Job Cost	\$226,844.80	
	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 License #	HEATED SQ FT 2339	GARAGE	ESQ FT 458		
Licerise #	Electrical Contractor Info	rmation			
Description of Work	Wiring Service	e Size: _	Amps T-Pole	e: <u>yes</u> YesNo	
Ideal Electric			27-7440		
Electrical Contractor's C	ompany Name		Telephone		
		colleen	.heinrich@ideale Email Address	elec.com	
Address			Email Address		
27098 License #	-				
LICCIISC #	Mechanical/HVAC Contractor	Informa	<u>ition</u>		
Description of Work	HVAC System				
A. Maynor Heating & Air Conditioning Inc.		g	196832421		
Mechanical Contractor's Company Name			Telephone		
1094 Classic Road Apex, NC 27539					
Address			Email Address	-	
35139	_				
License #	Plumbing Contractor Info	rmotion			
December of March	Plumbing Contractor Info		-	0	
•	Plumbing				
Barbour & Pourron Plumbing Inc Plumbing Contractor's Company Name		919533	4455 Telephone		
, ,			Гегерпопе		
PO Box 934 Clayton, NC 27528 Address			Email Address	-	
27132					
License #	-				
	Insulation Contractor Info	rmation	<u>l</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.

number of bedrooms, building and trade plans, Environmenta				
changes, I certify it is my responsibility to notify the Harnett	County Central Permitting Department of			
any and all changes.	f. : #450.00 After 0			
EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issis as per current fee schedule.	ue fee is \$150.00. After 2 years re-issue fee			
is as per current lee schedule.				
A 4 - 10 1				
Anosen Burk	4/17/2024			
Signature of Owner/Contractor/Officer(s) of Corporation	Date			
Affidavit for Worker's Compen	sation N.C.G.S. 87-14			
The undersigned applicant being the:				
Consul Contractor Owner Offi	and American of the Country of the C			
General Contractor Owner Offi	cer/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:	o), min(o) or corporation(o) performing the ment			
'				
Has three (3) or more employees and has obtained wo	orkers' 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 their o	wn policy of workers' compensation insurance			
covering themselves.	wit policy of workers compensation insurance			
covering themeervee.				
Has no more than two (2) employees and no subcontr	actors.			
While working on the project for which this permit is sought it				
Department issuing the permit may require certificates of cov				
to issuance of the permit and at any time during the permitted carrying out the work.	work from any person, firm or corporation			
can ying out the work.				
Sign w/Title:	Date:			
U				