

		Application #
	Harnett County Central	
t be owner/occupier or 420 McKinney Pkwy Lillington, NC 27546 PO Box 65 Lillington, NC 27546		n, NC 27546 27546
ny name & phone must	910-893-7525 ext. 1 Fax 910-893-2793	
information on license.		
	Application for Residential Buildin	ig and Trades Permit
Owner's Name:	Mattamy Homes LLC	Date 5/6/2024
		na NC 27526 Phone 9192333886
	idence Creek	
Description of Propos	ed Work: <u>Single Family Dwellin</u>	g Total Job Cost <u>\$219,710.40</u>
	General Contractor Inf	ormation
Mattamy Homes LLC		9192333886
Building Contractor's Company Name		Telephone
11000 Regency Pkwy Cary, NC 27518		_Raleigh_PlanReview@mattamycorp.com
Address		Email Address
<u>49775</u> License #	HEATED SQ FT 2324	
Description of Work	Electrical Contractor In	<u>formation</u> ice Size:Amps T-Pole: <u>_yes</u> YesNo
Ideal Electric Electrical Contractor's Company Name		<u>734-927-7440</u> Telephone
2436 South Miami Blvd Durham, NC 27703		_colleen.heinrich@idealelec.com
Address		Email Address
27098		
License #		
	Mechanical/HVAC Contract	or Information
Description of Work _	HVAC System	
A. Maynor Heating & Air Conditioning Inc.		9196832421
Mechanical Contractor's Company Name		Telephone
1094 Classic F	Road Apex, NC 27539	
Address		Email Address
35139		
License #	Diumbing Contractor In	formation
	Plumbing Contractor In	
• -	Plumbing	
Barbour & Pourron Plumbing Inc Plumbing Contractor's Company Name		<u>9195334455</u> Telephone
		relephone
PO Box 934 Clayton, NC 27528 Address		Email Address
27132		
License #		
	Insulation Contractor In	formation
	5001 Old Poole Rd Raleigh, NC 27610	9194536411
	'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.

Ander Broch Signature of Owner/Contractor/Officer(s) of Corporation

5/6/2024 Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the: _____ General Contractor _____ Owner _____ 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: 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. 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: Date: