



Application # _____

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

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: New Home Inc., LLC Date 6/3/2024
Site Address: 141 Beacon Hill Rd, Lillington, NC 27546 Phone (919) 422-2838
Subdivision: Duncans Creek Lot _____
Description of Proposed Work: New Single Family Total Job Cost \$166,625.87

General Contractor Information

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 GARAGE SQ FT
License #

Electrical Contractor Information

Description of Work New Single Family Service Size: 200 Amps T-Pole: Yes No
Ideal Electric, Inc. (313) 452-7176
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 Information

Description of Work 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

Description of Work New Single Family # Baths 2.5
Barbour and Pourron Plumbing & Service Inc. (919) 553-4455
Plumbing Contractor's Company Name Telephone
PO Box 934, Clayton, NC 27520 jeromy@bpplumbing.com
Address Email Address
27132
License #

Insulation Contractor Information

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

6/3/2024

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

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: *Rich Sherman* Manager Date: 6/3/2024