

			Application #		
ust be owner/occupier or nsed contractor. Address, npany name & phone must ch information on license.	Harnett County Central 420 McKinney Pkwy Lillingtor PO Box 65 Lillington, NC 910-893-7525 ext. 1 Fax 910-893-2793	n, NC 27546 27546	org/permits		
	Application for Residential Buildir	ng and Tra	ides Permit		
Owner's Name:	Mattamy Homes LLC	Date _	7/24/2024		
Site Address: 205 Bering Circle, Angier, NC 27501			Phone	9192333886	
Subdivision: <u>Riverfall</u>		Lot	12		
Description of Proposed Work: Single Family Dwe					
	General Contractor Inf	ormation			
Mattamy Home	s LLC		9192333886		
Building Contractor's	Telephone				
<u>11000 Regency</u> Address	_Raleigh_PlanReview@mattamycorp.com Email Address				
49775	HEATED SQ FT 2339	GARAGI	E SQ FT <u>458</u>		
License #	Electrical Contractor In	formation			
Description of Work	Serv			: <u>yes</u> Yes <u>N</u> o	
Ideal Electric Inc.		7349277440			
Electrical Contractor		Telephone			
	Blvd, Durham, NC 27703				
Address			Email Address		
<u>27098</u> License #					
	Mechanical/HVAC Contract	or Informa	ation		
Description of Work					
A. Maynor Heating & Air Conditioning Inc.		9196832421			
Mechanical Contract	or's Company Name	Telephone			
1094 Classic I					
Address		Email Address			
12309					
License #	Plumbing Contractor In	formation			
Description of Work	<u> </u>		# Baths	2.5	
•	Barbour & Pourron Plumbing Inc		9195334455		
	Plumbing Contractor's Company Name		Telephone		
PO Box 934 Clayton, NC 27528					
Address		Email Address			
27132					
License #	Insulation Contractor In	formation	'n		
Live Green Inc	5001 old Poole Rd Raleigh, NC 27610		-		
	's Company Name & Address	<u>9194536411</u> 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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

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

7/24/2024

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: