

Application #	
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\* 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: New Home Inc., LLC		Date 8/01/2024		
Site Address: 116 Plainfield Lane, Lillington, NC 27546	Phone	(919) 422-2838		
Subdivision: Duncans Creek	Lot	136		
Description of Proposed Work: New Single Family	Total Job Cost _	\$210,777.51		
General Contractor Informatio	n			
New Home Inc., LLC	(919) 422-28;	(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 2120 GARAGE S	Q FT_ 414			
License #				
Description of Work New Single Family Service Size:		ole: Y Yes No		
•		(313) 452-7176		
Ideal Electric, Inc. Electrical Contractor's Company Name	Telephone			
PO Box 969, Farmington, MI 48332	•	li@idealelec.com		
Address	Email Address			
27098-U				
License #				
Mechanical/HVAC Contractor Inform	<u>nation</u>			
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@maynor	services.com_		
Address	Email Address			
12309				
License #  Plumbing Contractor Information	on			
Description of Work New Single Family	 # Baths			
Barbour and Pourron Plumbing & Service Inc.	<del></del>			
Plumbing Contractor's Company Name	(919) 553-44 Telephone	+55		
PO Box 934, Clayton, NC 27520	jeromy@bppl	lumbing com		
Address	Email Address	among.com_		
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		8/01/2024			
Signature of Owner/Contractor/Office	er(s) of Corporation	Date			
Affidavit fo	r Worker's Con	npensation N.C.G.S.	87-14		
The undersigned applicant being the		iipeiisution N.O.O.O.	01 14		
General Contractor	OwnerX_	_ Officer/Agent of the Co	ntractor or Owner		
Do hereby confirm under penalties of set forth in the permit:	of perjury that the pe	erson(s), firm(s) or corpora	ation(s) performing the work		
X Has three (3) or more employ	ees and has obtain	ed workers' compensation	n insurance to cover them.		
Has one (1) or more subcontribute.	actors(s) and has c	btained workers' compen	sation insurance to cover		
$\underline{X}$ 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 Sharma	n Manager		Date: 8/01/2024		