

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 10/01/2024	
Site Address: 319 Duncan Creek Rd, Lillington, NC 27546	Phone	(919) 422-2838
Subdivision: Duncans Creek	Lot1	127
Description of Proposed Work: New Single Family	_ Total Job Cost	\$232,057
General Contractor Information		
New Home Inc., LLC	(919) 422-28	38
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 2705 GARAGE SC	FT 415	
License #		
Electrical Contractor Information		Polo: V Voc. No.
Description of Work New Single Family Service Size:		
Ideal Electric, Inc.	(313) 452	2-/1/6
Electrical Contractor's Company Name	Telephone	الاهنام مامام مصر
PO Box 969, Farmington, MI 48332 Address	Email Address	lli@idealelec.com
27098-U	Email Address	
License #		
Mechanical/HVAC Contractor Inform	ation	
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	<u>n</u>	
Description of Work New Single Family	_# Baths3	
Barbour and Pourron Plumbing & Service Inc.	(919) 553-44	455
Plumbing Contractor's Company Name	Telephone	
PO Box 934, Clayton, NC 27520	jeromy@bpp	lumbing.com
Address	Email Address	
27132		
License #		
Insulation Contractor Information		
LiveGreen Inc., 5001 Old Poole Road, Raleigh, NC 27610	(919) 453	-6411 <u> </u>
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	10/01/2024		
Signature of Owner/Contractor/Officer(s) of Corporation	Date		
Affidavit for Worker's Com The undersigned applicant being the:	pensation N.C.G.S. 87-14		
General Contractor OwnerX	Officer/Agent of the Contractor or Owner		
Do hereby confirm under penalties of perjury that the per set forth in the permit:	son(s), firm(s) or corporation(s) performing the work		
X Has three (3) or more employees and has obtaine	d workers' compensation insurance to cover them.		
Has one (1) or more subcontractors(s) and has obthem.	stained workers' compensation 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 Sherman Manager	Date: 10/01/2024		