

Application # _____

* 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: Mattamy Homes LLC	_Date _	10/3/2024	
Site Address: 160 Bering Circle, Angier, NC 27501		Phone	9192333886
Subdivision: Riverfall	Lot	17	
Description of Proposed Work: Single Family Dwelling			
General Contractor Infor	mation	_	
Mattamy Homes LLC		9192333886	
Building Contractor's Company Name		Telephone	
11000 Regency Pkwy Cary, NC 27518	Ralei	gh PlanReview	@mattamycorp.com
Address	_	Email Address	, ,
	GARAGI	E SQ FT 735	
License #			
Description of Work Service			e: ves Yes No
LI JEL W. L.			
Electrical Contractor's Company Name		Telephone	
2436 South Miami Blvd, Durham, NC 27703		•	
Address		Email Address	=
27098			
License #			
Mechanical/HVAC Contractor	Informa	<u>ation</u>	
Description of Work			_
A. Maynor Heating & Air Conditioning Inc.		9196832421	
Mechanical Contractor's Company Name		Telephone	
1094 Classic Road Apex, NC 27539			_
Address		Email Address	
12309			
License #			
Plumbing Contractor Info		_	
Description of Work		_# Baths	4.5
	919533		
Plumbing Contractor's Company Name		Telephone	
PO Box 934 Clayton, NC 27528		Consil Address	_
Address		Email Address	
<u>27132</u>			
License # Insulation Contractor Information			
Live Green Inc. 5001 old Poole Rd Raleigh, NC 27610		<u>-</u> 9194536411	
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.

10/3/2024

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.			
$\frac{}{\text{them.}}$ Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover			
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: Draw Brody Operations Coordinator Date: 10/7/2024			