

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 _	2/13/2025	
Site Address:	272 Thomas Store Drive, Broadway NC 2	7505	Phone	9192333886
Subdivision: Fox	Field Farm	Lot	54	
Description of Propo	osed Work: <u>Single Family Dwelling Mode</u>	el Home	_ Total Job Cost	\$255,673.60
	General Contractor In	formation		
Mattamy Homes LLC			9192333886	
Building Contractor's Company Name			Telephone	
			igh_PlanReview	@mattamycorp.com
Address			Email Address	
49775	HEATED SQ FT 2768	GARAG	E SQ FT <u>468</u>	
License #	Electrical Contractor I	nformation	1	
Description of Work	Serv	vice Size: _	<u> </u>	e: <u>yes</u> YesNo
Romanoff Electrical Residential LLC				2
Electrical Contracto			Telephone	
	rive, Raleigh, NC 27609			_
Address			Email Address	
12915	<u></u>			
License #	Mechanical/HVAC Contrac	tor Inform	ation	
Description of Work				
•	ing & Air Conditioning Inc.		9196832421	=
Mechanical Contractor's Company Name			Telephone	
1094 Classic Road Apex, NC 27539				
Address	Troad Apex, NO 21009		Email Address	_
12309				
License #				
	Plumbing Contractor I	<u>nformatior</u>	<u>1</u>	
Description of Work			_# Baths	2.5
		919533	34455	
Plumbing Contracto	r's Company Name		Telephone	
	layton, NC 27528		E 1 A	_
Address			Email Address	
27132 License #				
LICENSE #	Insulation Contractor I	nformatio	n	
Live Green Inc.	5001 old Poole Rd Raleigh, NC 27610		- 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.

is as per current fee schedule.	ue iee
Signature of Owner/Contractor/Officer(s) of Corporation 2/13/2025 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 set forth in the permit:	the work
Has three (3) or more employees and has obtained workers' compensation insurance to cov	er them.
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to them.	o cover
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation in covering themselves.	surance
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 Permitti Department issuing the permit may require certificates of coverage of worker's compensation insurate issuance of the permit and at any time during the permitted work from any person, firm or corporate carrying out the work.	ance prior
Sign w/Title:Date:	