

_

		Application #
Must be owner/occupier or ensed contractor. Address, mpany name & phone must atch information on license.	Harnett County Central 420 McKinney Pkwy Lillingto PO Box 65 Lillington, NO 910-893-7525 ext. 1 Fax 910-893-2793	n, NC 27546 2 27546 www.harnett.org/permits
	Application for Residential Buildin	ng and Trades Permit
Owner's Name:	Mattamy Homes LLC	Date <u>2/18/2025</u>
		rina NC 27526 Phone <u>9192333886</u>
Subdivision:	idence Creek	Lot115
		gTotal Job Cost <u>\$187,168.80</u>
	General Contractor In	
Mattamy Home	s LLC	9192333886
Building Contractor's Company Name		Telephone
11000 Regency Pkwy Cary, NC 27518		_Raleigh_PlanReview@mattamycorp.com
Address		Email Address
<u>49775</u> License #	HEATED SQ FT1882	GARAGE SQ FT 425
	Electrical Contractor Ir	
Description of Work	WiringServ	ice Size:Amps T-Pole: <u>_yes</u> YesNo
Ideal Electric		<u>734-927-7440</u>
Electrical Contractor'		Telephone
<u>2436 South Miami Blvd Durham, NC 27703</u> Address		<u>colleen.heinrich@idealelec.com</u> Email Address
27098		
License #		
	Mechanical/HVAC Contract	
Description of Work	HVAC System	
A. Maynor Heatir	g & Air Conditioning Inc.	9196832421
Mechanical Contractor's Company Name		Telephone
	Road Apex, NC 27539	
Address		Email Address
<u>35139</u> License #		
	Plumbing Contractor In	nformation
Description of Work	Plumbing	
•	rron Plumbing Inc	9195334455
Plumbing Contractor		Telephone
PO Box 934 Clayton, NC 27528		
Address		Email Address
<u>27132</u>		
License #	Insulation Contractor I	nformation
Live Green Inc	5001 Old Poole Rd Raleigh, NC 27610	
	'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.

Andrem Broch

2/18/2025

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

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: