

Application # _____

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

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Mattamy Homes LLC	Date	7/9/2025			
Site Address: 0528-45-7647.000, Lillington NC 27546		Phone	<u>919233</u>	3886	
Subdivision: <u>Seagrass Landing</u>		Lot	7	'5	
Description of Proposed Work: Single Family Dwelling					
General Contractor Info	ormation				
Mattamy Homes LLC		9192333	3886		
Building Contractor's Company Name		Telephone			
11000 Regency Pkwy Cary, NC 27518	_Raleig	aleigh_PlanReview@mattamycorp.com			
Address		Email A	ddress		
49775HEATED SQ FT2821	GARAGE	SQ FT	<u>482</u>		
License #	formation				
Description of Work Service	ce Size:	Amps	T-Pole:	yes Yes	No
Romanoff Electrical Residential LLC					
Electrical Contractor's Company Name		Telepho			
3006 Industrial Drive, Raleigh, NC 27609					
Address		Email A	ddress		
12915					
License #					
Mechanical/HVAC Contracto					
Description of Work					
A. Maynor Heating & Air Conditioning Inc.	9	919-683-2421			
Mechanical Contractor's Company Name		Telephone			
1094 Classic Road Apex, NC 27539					
Address		Email A	ddress		
36504					
License #	formation				
Plumbing Contractor Inf					
Description of Work		-			
Barbour & Pourron Plumbing Inc					
Plumbing Contractor's Company Name		Telepho	ne		
PO Box 934 Clayton, NC 27528		Emoil A			
Address		Email A	Juless		
27132 License #					
Insulation Contractor In	<u>formatio</u> n				
Live Green Inc. 5001 old Poole Rd Raleigh, NC 27610		919453	6411		
Insulation Contractor's Company Name & Address		Telepho			



*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 <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> 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.

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

7/9/2025

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 the work set forth in the permit:				
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.				
$\frac{1}{1}$ Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.				
$\underline{\checkmark}$ 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: Archengzen Operations Coordinator Date: 7/9/2025				