



RESIDENTIAL BUILDING APPLICATION

Site Address: 81 Clarabella Drive, Fuquay Varina NC 27526		PIN:	0635-97-9958.000
Owner: Mattamy Homes LLC	Phone: 919-233-3886	Email: _	_raleigh_planreview@mattamycorp.com
Description of Proposed Work: _	Single Family Model Home, Clarabella Lot 3		Total Job Cost: _ \$180,180.00
	GENERAL CONTRACTOR II	NFORMATION	l
* Must be owner o	r licensed contractor. Address, company nam		
Mattamy Homes LLC		919-233-3886	
General Contractor's Company Name		Phone	
11000 Regency Pkwy, Cary NC 27518		_raleigh_planre	eview@mattamycorp.com
Address		Email	
49775			
License #			
	ELECTRICAL CONTRACTOR	INFORMATIO	<u>N</u>
Description of Work:		Service Size: _	Amps T-Pole: YES ₩ NO □
W-3 Electric		919-550-7341	
Electrical Contractor's Company Name		Phone	
308 W. Main Street, Clayton NC 27520			
Address		Email	
34522			
License #			
	MECHANICAL/HVAC CONTRACT	OR INFORMA	ATION
	MECHANICAE/IIVAC CONTRACT	OK INI OKWA	KIION
Description of Work:			
Carolina Air Services of Raleigh		919-422-9922	
Mechanical Contractor's Company Nar	ne	Phone	
1400 Chalk Rd, Wake Forrest NC 27587			
Address		Email	
23587			
License #			
	DI LIMPING CONTRACTOR I		
	PLUMBING CONTRACTOR I	NEURWATION	<u> </u>
Description of Work:			# of Fixtures: 2
•			
Barbour & Pourron Plumbing Plumbing Contractor's Company Name		919-533-4455 Phone)
	•	FIIONE	
PO Box 934, Clayton NC 27528 Address		Email	
		Lillali	
27132 License #			
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	INSULATION CONTRACTOR	INFORMATIO	<u>N</u>
Live Green Inc. 5001Old Poole Rd, F	Raleigh NC 27610	919-453-64 ⁻	11
Insulation Contractor's Company Name		Phone	··



I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule. Drew Brody
Signature of Owner/Contractor/Officer of Corporation 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 Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit: V Has 3 or more employees and has obtained workers' compensation insurance to cover them, Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them, Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves, Has no more than 2 employees and no subcontractors, While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work. Draw Brody
Signature of Owner/Contractor/Officer of Corporation