

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: New Home Inc., LLC	Date 10-1-25
Site Address: 808 Beacon Hill Road Lillington, NC 27546	(0.10) 100 0000
Subdivision: Duncans Creek	
Description of Proposed Work: New Single Family	Total Job Cost \$272,481
New Home Inc., LLC	<u>on</u> (919) 422-2838
Building Contractor's Company Name	Telephone
1611 Jones Franklin Road, STE 101, Raleigh, NC 27606	rich.sherman@newhomeinc.com
Address	Email Address
82896 HEATED SQ FT 2708 GARAGE	SQ FT 415
License #	
Electrical Contractor Information	
	e: 200 Amps T-Pole: X Yes No
Ideal Electric, Inc.	(313) 452-7176
Electrical Contractor's Company Name	Telephone
PO Box 969, Farmington, MI 48332	michael.frittelli@idealelec.com
Address	Email Address
27098-U	
License #	
Mechanical/HVAC Contractor Info	<u>rmation</u>
Description of Work New Single Family	
A. Maynor Heating & Air Conditioning, Inc.	(919) 361-0993
Mechanical Contractor's Company Name	Telephone
100 Goodworth Drive, Apex, NC 27539	brett@maynorservices.com
Address	Email Address
12309	
License #	
Plumbing Contractor Information	<u>tion</u>
Description of Work New Single Family	# Baths
Barbour and Pourron Plumbing & Service Inc.	(919) 553-4455
Plumbing Contractor's Company Name	Telephone
PO Box 934, Clayton, NC 27520	jeromy@bpplumbing.com
Address	Email Address
27132	
License #	
Insulation Contractor Informa	<u>tion</u>
LiveGreen Inc., 5001 Old Poole Road, Raleigh, NC 27610	(919) 453-6411
Insulation Contractor's Company Name & Address	Telephone



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.

10-1-25

Rich Sharman

Manager

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 X 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:	
X 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.	
$\frac{X}{\text{covering themselves}}$ Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance	
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: Rich Sherman Manager Date: 10-1-25	