

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 10-9-25	
Site Address: 570 Beacon Hill Road Lillington, NC 27546	Phone (919) 422-2838	
Subdivision: Duncans Creek	Lot 56	
Description of Proposed Work: New Single Family	Total Job Cost \$276,469	
General Contractor Information		
New Home Inc., LLC	(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 2561 GARAGE S	Q FT 394	
License #		
Electrical Contractor Information Contract Size 200 Annua T Delay X Vee Ne		
Description of Work New Single Family Service Size:		
Ideal Electric, Inc.	(313) 452-7176	
Electrical Contractor's Company Name	Telephone	
PO Box 969, Farmington, MI 48332	michael.frittelli@idealelec.com	
Address 27098-U	Email Address	
License #		
Mechanical/HVAC Contractor Inform	nation	
Description of Work New Single Family		
A. Maynor Heating & Air Conditioning, Inc.	(919) 361-0993	
Mechanical Contractor's Company Name	Telephone	
• •		
100 Goodworth Drive Anex NC 27539	•	
100 Goodworth Drive, Apex, NC 27539	brett@maynorservices.com	
Address	•	
Address 12309	brett@maynorservices.com	
Address	brett@maynorservices.com Email Address	
Address 12309 License # Plumbing Contractor Information	brett@maynorservices.com Email Address on	
Address 12309 License #	brett@maynorservices.com Email Address	
Address 12309 License # Plumbing Contractor Information Description of Work New Single Family Barbour and Pourron Plumbing & Service Inc.	brett@maynorservices.com Email Address on# Baths (919) 553-4455	
Address 12309 License # Plumbing Contractor Information Description of Work New Single Family	brett@maynorservices.com Email Address on # Baths (919) 553-4455 Telephone	
Address 12309 License # Plumbing Contractor Information Description of Work New Single Family Barbour and Pourron Plumbing & Service Inc. Plumbing Contractor's Company Name	brett@maynorservices.com Email Address on# Baths (919) 553-4455	
Address 12309 License # Plumbing Contractor Information Description of Work New Single Family Barbour and Pourron Plumbing & Service Inc. Plumbing Contractor's Company Name PO Box 934, Clayton, NC 27520	brett@maynorservices.com Email Address Dn # Baths (919) 553-4455 Telephone jeromy@bpplumbing.com	
Address 12309 License # Plumbing Contractor Information Description of Work Barbour and Pourron Plumbing & Service Inc. Plumbing Contractor's Company Name PO Box 934, Clayton, NC 27520 Address 27132 License #	brett@maynorservices.com Email Address Dn # Baths (919) 553-4455 Telephone jeromy@bpplumbing.com Email Address	
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*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.

Rich Sherman	10-9-25
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Com The undersigned applicant being the:	pensation N.C.G.S. 87-14
General Contractor Owner X	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the per set forth in the permit:	son(s), firm(s) or corporation(s) performing the work
X Has three (3) or more employees and has obtaine	d workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obthem.	stained workers' compensation insurance to cover
$\frac{X}{\text{covering themselves}}$ Has one (1) or more subcontractors(s) who has the	eir own policy of workers' compensation insurance
Has no more than two (2) employees and no subc	contractors.
While working on the project for which this permit is soug Department issuing the permit may require certificates of to issuance of the permit and at any time during the perm carrying out the work.	coverage of worker's compensation insurance prior
Sign w/Title: Rich Sherman Manage	Date: 10-9-25