



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 PermitOwner's Name: New Home Inc., LLC Date 10-29-25Site Address: 510 Beacon Hill Road Lillington, NC 27546 Phone (919) 422-2838Subdivision: Duncans Creek Lot 59Description of Proposed Work: New Single Family Total Job Cost \$220,799**General Contractor Information**New Home Inc., LLC(919) 422-2838

Building Contractor's Company Name

Telephone

1611 Jones Franklin Road, STE 101, Raleigh, NC 27606rich.sherman@newhomeinc.com

Address

Email Address

82896**HEATED SQ FT** 1970**GARAGE SQ FT** 401

License #

Electrical Contractor InformationDescription of Work New Single Family Service Size: 200 Amps T-Pole: ☒ Yes ☐ NoIdeal Electric, Inc.(313) 452-7176

Electrical Contractor's Company Name

Telephone

PO Box 969, Farmington, MI 48332michael.frittelli@idealelec.com

Address

Email Address

27098-U

License #

Mechanical/HVAC Contractor InformationDescription of Work New Single FamilyA. Maynor Heating & Air Conditioning, Inc.(919) 361-0993

Mechanical Contractor's Company Name

Telephone

100 Goodworth Drive, Apex, NC 27539brett@maynorservices.com

Address

Email Address

12309

License #

Plumbing Contractor InformationDescription 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 27520jeromy@bpplumbing.com

Address

Email Address

27132

License #

Insulation Contractor InformationLiveGreen Inc., 5001 Old Poole Road, Raleigh, NC 27610(919) 453-6411

Insulation Contractor'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.

Rich Sherman

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

10-29-25

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: *Rich Sherman* Manager Date: 10-29-25