

Application # <u>SF01812-60</u>3 |

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

\* Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match information on license.

**Application for Residential Building and Trades Permit** 

tion on license.	
Owner's Name: Eric/Leigh Walker	Date:
Owner's Name: Eric/Leigh Walker Site Address: 1726 Carson Gregory Rd Angier	NC27501 Phone: 919-902-821
Subdivision:	Lot:
Subdivision:	wdular
General Contractor Informatio	on a
TCC Vandebuilt LLC	919-724-6319
Building Contractor's Company Name	Telephone
3300 Jeffer Davis Hay Santo dNC 27332	
Address	Email Address
43964	
License #	
Description of Work Service Size:	On Amns T Polo: Vos V No
Description of Work Service Size:	910-042 3210
	Telephone
3700 Huy 15/501 Carthage NC 29327	releptione
Address	Email Address
32 340	Littali Address
License #	
Mechanical/HVAC Contractor Inform	mation
Description of Work	
Cavaline Air INC	910-847-7207
	Telephone
Mechanical Contractor's Company Name 3700 Hwy 15/501 Carthage NC 29327	
Address	Email Address
23549	
License #	
Plumbing Contractor Information	<u>on</u>
Description of Work	# Baths
Justin Soft	910-730-3386
Plumbing Contractor's Company Name	Telephone
Plumbing Contractor's Company Name 469 Regg, Will KD Hamlet NC 28345	
Address 33659	Email Address
License #	
Insulation Contractor Informati	<u>on</u>
Insulation Contractor's Company Name & Address	Telephone
modation contractor's company name & Address	releptione

\*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 <a href="bysigning-below-I have obtained all subcontractors-bermission to obtain these permits">bermission to obtain these permits</a> and if <a href="mailto:any">any</a> 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.

any and an changes.
<b>EXPIRED PERMIT FEES</b> - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee
is as per current fee schedule.
0/1/19
Signature of Owner/Contractor/Officer(s) of Corporation  Date
organical of other contraction of comportation
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 subcentractors(s) who has their own policy of workers' compensation incurrence
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
Sign w/Title: Date: 1/14/19
Sign w/Title: Date: (//7//

### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 975603

Filed on: 01/11/2019 Initially filed by: Burtonbr

### Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com (http://www.liensnc.com)

Address: 19 W. Hargett St., Suite 507 /

Raleigh, NC 27601 **Phone:** 888-690-7384 **Fax:** 913-489-5231

Email: support@liensnc.com (mailto.support@liensnc.com)

## Property Type

Harnett County

1726 Carson Gregory Rd Angier, NC 27501

1-2 Family Dwelling

01/11/2019

Date of First Furnishing

## Owner Information

Carson & Leigh Ann Walker 1208 NC hwy 242 S Benson, NC 27504 United States Email: none@none.com Phone: 919-902-8211

View Comments (0)

## Project Property Print & Post

#### Contractors:

Please post this notice on the Job Site.

**Suppliers and Subcontractors:** Scan this image with your smart phone to view this filing. You can then file a Notice to Lien Agent for this

project.

Technical Support Hotline: (888) 690-7384