

\* 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 # \_\_\_\_\_

Harnett County Central Permitting  
PO Box 65 Lillington, NC 27546  
Phone 910-893-7525 Fax 910-893-2793 www.harnett.org

**Application for Residential Building and Trades Permit**

Owner's Name: Penny Smith Date: 10/29/19  
Site Address: 1129 OAKRIDGE DUNCAN RD Phone: 919-491-5546  
Directions to job site from Lillington: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: 27.6 x 68 modular w/ 6 x 22 ft porch #Bedrooms: 3  
Heated SF 1859 Unheated SF 132 Finished Rec Room? \_\_\_\_\_ Crawl Space  Slab ( )

**General Contractor Information**  
Building Contractor's Company Name: TCC Vanderbuilt LLC Telephone: 919-720-4413 (Woody)  
Address: 3300 Jefferson Pavis Hwy Sanford NC 27332 License #: 43964

Signature of Owner/Contractor/Officer(s) of Corporation: \_\_\_\_\_  
Must sign & fill out second page

**Electrical Permit Information**  
Description of Work: \_\_\_\_\_ Service Size: 200 Amps TPole: yes/no  
Carolina Power Generators INC Telephone: 910-997-2207  
Electrical Contractor's Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: 3200 Hwy 15/501 Carthage NC 28327 License #: 32390

Signature of Officer(s) of Corporation: Gary Bullard

**Mechanical Permit Information**  
Description of Work: \_\_\_\_\_ Telephone: 910-997-2207  
Carolina Air Heats/Cool Fnc.  
Mechanical Contractor's Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: 3200 Hwy 15/501 Carthage NC 28327 License #: 23549

Signature of Officer(s) of Corporation: Gary Bullard

**Plumbing Permit Information**  
Description of Work: \_\_\_\_\_ # Baths: 2  
WR Curtis Telephone: 919-220-0168  
Plumbing Contractor's Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: 6314 Carpenter Rd Sanford NC 27330 License #: 10924

Signature of Officer(s) of Corporation: WR Curtis

**Insulation Permit Information**  
Insulation Contractor's Company Name & Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Homeowners Applying to Build Their Own Home**

Please answer the following questions then see a Permit Technician to determine if you qualify for permit under Owners Exemption. Questionnaire per G.S. 87-14 Regulations as to Issue of Building Permits (Memo available upon request)

- 1. Do you own the land on which this building will be constructed?    \_\_\_ yes    \_\_\_ no
- 2. Have you hired or intend to hire an individual to superintend and manage construction of the project?    \_\_\_ yes    \_\_\_ no
- 3. Do you intend to directly control & supervise construction activities? \_\_\_ yes    \_\_\_ no
- 4. Do you intend to schedule, contract, or directly pay for all phases of construction work to be done?    \_\_\_ yes    \_\_\_ no
- 5. Do you intend to personally occupy the building for at least 12 consecutive months following completion of construction and do you understand that if you do not do so, it creates the presumption under law that you fraudulently secured the permit?    \_\_\_ yes    \_\_\_ no

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 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.

10/29/19

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     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.

Company or Name: TCC Vanderbuilt LLC

Sign w/Title:  Officer/Agent Date: 10/29/19

**DO NOT REMOVE!**

**Details: Appointment of Lien Agent**

Entry #: 1129735

Filed on: 10/18/2019

Initially filed by: Burtonbr

**Designated Lien Agent**

Fidelity National Title Company, LLC  
**Online:** [www.liensnc.com](http://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) (<mailto:support@liensnc.com>)

**Owner Information**

Penny Smith  
1150 Oakridge Duncan Rd  
Fuquay Varina , NC 27526  
Usa  
Email: [none@none.com](mailto:none@none.com)  
Phone: 919-441-5546

**Project Property**

1129 Oakridge Duncan Rd  
Fuquay Varina , NC 27526  
Harnett County

**Property Type**

1-2 Family Dwelling

**Date of First Furnishing**

10/18/2019

**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.

[View Comments \(0\)](#)

**Technical Support Hotline:** (888) 690-7384