



Application # _____

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

Owner's Name: Wellco Contractors Inc Date: 6-20-20
Site Address: 288 B.J. PALMER DRIVE, SPRING LAKE NC.28390 Phone: 910-263-0276
Subdivision: OVERHILLS CREEK Lot: 153
Description of Proposed Work: ADDITION Total Job Cost: \$45,000

General Contractor Information

Wellco Contractors Inc 910-263-0276
Building Contractor's Company Name Telephone
PO Box 766, Spring Lake, NC 28390 WELLCO@WSWELLONSREALTY.COM
Address Email Address
7402
License #

Electrical Contractor Information

Description of Work TOTAL ELECTRICAL Service Size: 200 Amps T-Pole: Yes No
JM POPE ELECTRIC LLC 919-776-5144
Electrical Contractor's Company Name Telephone
409 Chatham St., Sanford, NC pmillerc46600@gmail.com
Address Email Address
21326L
License #

Mechanical/HVAC Contractor Information

Description of Work TOTAL HEATING AND COOLING
TOTAL SYSTEMS HEATING & COOLING 910-436-3450
Mechanical Contractor's Company Name Telephone
13341 Hwy 210 S., Spring Lake, NC 28390 service@totalsystemsnc.com
Address Email Address
28846
License #

Plumbing Contractor Information

Description of Work TOTAL PLUMBING # Baths 2
1MLS PLUMBING CO INC 910-484-1124
Plumbing Contractor's Company Name Telephone
1500 Gillespie St., Fayetteville, NC mlsplumbing@hotmail.com
Address Email Address
NC28833P!
License #

Insulation Contractor Information


PARKER BROTHERS INSULATION 910-564-4132
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.


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

6-20-20
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:  Manager Date: 6-20-20



Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

****A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION****

LANDOWNER: REGINA THOMAS Mailing Address: 288 BJ PALMER DRIVE

City: Spring Lake State: NC Zip: 28390 Contact No: 910-273-8221 Email: regina.thomas7.civ@mail.com

APPLICANT: Wellco Contractors Inc Mailing Address: PO Box 766,

City: Spring Lake State: NC Zip: 28390 Contact No: 910-263-0276 Email: JASON@WSWELLONSREALTY.COM

*Please fill out applicant information if different than landowner

ADDRESS: PO Box 766 Spring Lake, NC 28390 PIN: 5508520

Zoning: _____ Flood: NO Watershed: _____ Deed Book / Page: _____

Setbacks - Front: _____ Back: _____ Side: _____ Corner: _____

PROPOSED USE:

- SFD: (Size _____ x _____) # Bedrooms: _____ # Baths: _____ Basement (w/wo bath): _____ Garage: _____ Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____ Monolithic Slab: _____
(Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms))
- Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
(Is the second floor finished? () yes () no Any other site built additions? () yes () no)
- Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)
- Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
- Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
- Addition/Accessory/Other: (Size 11725F 191' x 40') Use: SFD Closets in addition? (X) yes () no

Water Supply: X County _____ Existing Well _____ New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: _____ New Septic Tank _____ Expansion _____ Relocation _____ Existing Septic Tank X County Sewer (Complete Environmental Health Checklist on other side of application if Septic)

Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

Structures (existing or proposed): Single family dwellings: _____ Manufactured Homes: _____ Other (specify): _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Signature of Owner or Owner's Agent

Date

6-20-20

*****It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.*****

This application expires 6 months from the initial date if permits have not been issued*

APPLICATION CONTINUES ON BACK

strong roots • new growth

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1224986

Filed on: 04/14/2020

Initially filed by: Wellco

Designated Lien Agent

Investors Title Insurance Company

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>)

Project Property

288 BJ Palmer Dr
Spring Lake, NC 28390
Harnett County

Property Type

1-2 Family Dwelling

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.

Owner Information

REGINA THOMAS
288 BJ Palmer Dr
SPRING LAKE, NC 28390
United States
Email: wellco@wswellonsrealty.com
Phone: 910-436-3131

Date of First Furnishing

04/20/2020

View Comments (0)

Technical Support Hotline: (888) 690-7384