

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: Thanks and Regione Mantan Man	Data 9-1-2022
Owner's Name: Thomas and Breanne Montgomery	Date 1-1 ZUZZ
Site Address: 255 Executive Drive Lillington NC 10	821596 Phone
Subdivision:	Lot
Description of Proposed Work: Repairs from a fire	Total Job Cost _ <i>270 , ō</i> oo
General Contractor Information	
Pho Restoration, Inc. Building Contractor's Company Name	910-814-2502
1601 E McNeill Street Lillington NC 27546 Address	josh ephcrestoration.com Email Address
49762 unlimited HEATED SQ FT GARAGE SI	QFT
Electrical Contractor Information	<u>n</u>
Description of Work Replace Fre Damese Wiring Service Size:	Amps T-Pole: Ves No
Mr. Sparky Electric Inc. Electrical Contractor's Company Name	910 - 689 - 77.39 Talanhana
	Telephone
177 washington LN Cameron NC 28326 Address	mrsparkyelectric 1 e.gmail.com Email Address
35014	
License # Mechanical/HVAC Contractor Inform	nation
Description of Work Replace Puetwork and Sysfems	nation .
	919 774 1 811
Toyner Dickens Heating and Air Mechanical Contractor's Company Name	919 - 774 - 684 Telephone
2218 Lee Ave sanford NC 27330	
Address	accounting@ joyner - dickers com Email Address
9369	
License #	
Plumbing Contractor Information	
Description of Work Roysh In 2nd Floor Replace Fixtures	
Magner Plumbing Plumbing Contractor's Company Name	910-890-2299
	Telephone
PO Box GOT Mamers NC 2522	ivagner plumbing co e yahoo. com Email Address
Address	Email Address
L. 31576 License #	
Insulation Contractor Information	<u>on</u>
Phc Restoration INC	910-814-2 5 02_
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.

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.
1/ / / / / / / / / / / / / / / / / / /

(Rev. October 2018)

Department of the Treasury

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	 Name (as shown on your income tax return). Name is required on this line; do PHC Restoration Inc 	not leave this line blank.		
	2 Business name/disregarded entity name, if different from above			
page 3.	Check appropriate box for federal tax classification of the person whose nam following seven boxes.	e is entered on line 1. Che	ck anly one of the	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
s. Is on	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member ☐ C	Partnership	Trust/estate	Exempt payee code (if any)
ğğ	Limited liability company. Enter the tax classification (C=C corporation, S=	S corporation, P=Partners	ship) ►	
Print or type. Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from the owner for U.S. federal tax puis disregarded from the owner for U.S. federal tax puis disregarded from the owner should check the appropriate box for the tax	n of the single-member ow om the owner unless the ov urposes. Otherwise, a singl	ner. Do not check wner of the LLC is le-member LLC that	Exemption from FATCA reporting code (if any)
<u>č</u>	☐ Other (see instructions) ▶			(Applies to accounts maintained outside the U.S.)
Š	5 Address (number, street, and apt. or suite no.) See instructions.		Requester's name	and address (optional)
See	P O Box 129			
Ø	6 City, state, and ZIP code			
	Lillington, NC 27546			
	7 List account number(s) here (optional)			
Pai	t I Taxpayer Identification Number (TIN)			
	your TIN in the appropriate box. The TIN provided must match the name		200000000000000000000000000000000000000	curity number
	up withholding. For individuals, this is generally your social security nument alien, sole proprietor, or disregarded entity, see the instructions for I		or a	
	es, it is your employer identification number (EIN). If you do not have a r		ta 🔲 📗	
ΠN, Ι	ater.		or	
	: If the account is in more than one name, see the instructions for line 1. ber To Give the Requester for quidelines on whose number to enter.	. Also see What Name a	and Employe	r identification number
NUITIL	to dive the nequester for guidelines on whose number to enter.		5 6	- 2 2 5 6 2 5 1
Par	t II Certification			
Unde	r penalties of perjury, I certify that:			
2. I aı Se	e number shown on this form is my correct taxpayer identification numb m not subject to backup withholding because: (a) I am exempt from bac rvice (IRS) that I am subject to backup withholding as a result of a failur longer subject to backup withholding; and	ckup withholding, or (b)	I have not been i	notified by the Internal Revenue
3. I ar	m a U.S. citizen or other U.S. person (defined below); and			
4. The	e FATCA code(s) entered on this form (if any) indicating that I am exemp	ot from FATCA reporting	g is correct.	
you h acqui	fication instructions. You must cross out item 2 above if you have been no ave failed to report all interest and dividends on your tax return. For real est sition or abandonment of secured property, cancellation of debt, contribution than interest and dividends, you are not required to sign the certification, b	tate transactions, item 2 ons to an individual retire	does not apply. F ement arrangemer	or mortgage interest paid, nt (IRA), and generally, payments
Sigr		C	Date ► 1/28	8/2022
Ge	neral Instructions	• Form 1099-DIV (div funds)	vidends, including	those from stocks or mutual
Section notes	on references are to the Internal Revenue Code unless otherwise I.	•	various types of i	ncome, prizes, awards, or gross
	re developments. For the latest information about developments ed to Form W-9 and its instructions, such as legislation enacted	• •	k or mutual fund	sales and certain other

after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

- transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Airenge Uear

2022

Tirense No.

North Carolina

Airenging Anard for General Contractors

This is to Arrtify Ohat:

PHC Restoration, Inc.

Lillington, NC

is duly registered and entitled to practice

General Contracting

Limitation: Unlimited

Classification: Building

December 31, 2022

Mitness nur hands and seal of the Board. mhen this Certificate expires. Dated, Raleigh, N.C.

This certificate may not be altered. January 01, 2022

C. Lauk Wiener



DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1767017

Filed on: 09/02/2022 Initially filed by: Phcjosh

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com

Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603 **Phone:** 888-690-7384 **Fax:** 913-489-5231

Email: support@liensnc.com purposusper places, com

Owner Information

Thomas Montgomery 255 Executive Dr Lillington, NC 27546 United States

Email: breanne.higdon@yahoo.com

Phone: 502-381-9260

Project Property

Repairs to the home from a fire 255 Executive Dr Lillington, NC 27546 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

09/02/2022

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



PID: 030507 0046 17 PIN: 0507-33-2577.000

Account Number: 1500036538

Owner: MONTGOMERY THOMAS J & MONTGOMERY BREANNE K T

Mailing Address: 255 EXECUTIVE DR LILLINGTON, NC 27546

Physical Address: 255 EXECUTIVE DR LILLINGTON, NC 27546 ac

Description: LT#17 OAKMONT SD PH 1 0.81AC M#2012-22

Surveyed/Deeded Acreage: 1
Calculated Acreage: 0.81
Deed Date: 1590642000000
Deed Book/Page: 3816 - 0876
Plat(Survey) Book/Page: 2012 - 22

Last Sale: 2020 - 5
Sale Price: \$272500
Qualified Code: Q
Vacant or Improved: I
Transfer of Split: T
Actual Year Built: 2013

Heated Area: 3103.25 SqFt

Building Count : 1

Harnett County GIS

Building Value: \$300584

Parcel Outbuilding Value: \$810

Parcel Land Value: 59710

Market Value: \$361104

Deferred Value: \$0

Total Assessed Value: \$361104

Zoning: RA-20R - 0.81 acres (100.0%)
Zoning Jurisdiction: Harnett County

Wetlands: No

FEMA Flood: Minimal Flood Risk

Within 1mi of Agriculture District: Yes

Elementary School: South Harnett Elementary

Middle School: Western Hamett Middle

High School: Western Harnett High

Fire Department: Benhaven

EMS Department: Medic 13, D13 EMS, D13 FR

Law Enforcement: Harnett County Sheriff

Voter Precinct: Barbecue

County Commissioner: Mark Johnson School Board Member: Joey Powell



- -0046- -17-Parcel ID: 03-0507-

PLAT: 2012/22 UNIQ ID 282371 ID NO: 0507-33-2577.000

SRC= Owner

0.8100 AC

CARD NO. 1 of 1

1.0000 LT

SPLIT FROM ID 231583

MONTGOMERY THOMAS J MONTGOMERY BREANNE K T 255 EXECUTIVE DR LILLINGTON NC

NN: 17 - COUNTY WIDE REVALUATION BENHAVEN FIRE ADVALOREM TAX (100), COUNTY WIDE ADVALOREM TAX (100), SOLID WASTE FEE SOLID

WASTE (1) LT#17 OAKMONT SD PH 1 0.81AC M#2012-22 Reval Year: 2022 Tax Year: 2022

59,710 361,104 361,104 361,104 361,104 MARKE 300,58 SALES PRICE NO. ROUT: WTRSHD: 235,320 **CODE** 5,120 25,000 1.00 TOTAL PRESENT USE VALUE - LAND TOTAL VALUE DEFERRED - PARCEL 0.00 TOTAL TAXABLE VALUE - PARCEL 8 2000.00 TOTAL APPRAISED VALUE - CARD TOTAL APPRAISED VALUE - PARCEL DEPR. BUILDING VALUE - CARD DEPR. OB/XF VALUE - CARD MARKET LAND VALUE - CARD TOTAL MARKET VALUE - CARD PRIOR APPRAISAL PRESENT USE VALUE DEFERRED VALUE 3.80 OFF. RECORD 3.70 03816 0876 CREDENCE TO LAND VALUE 0.00 OBXF VALUE 0.00 0.00 00.0 0.00 0.00 EYB 2013 9000.00 NB FACTOR AYB 2013 RATE TOTAL LIVING 0.04000 AREA 3,363 1,000 3.000 4.000 COUNT DEPRECIATION 3 - 2.0 Stories STYLE NORM **BASE RATE** SINGLE FAMILY RESIDENTIAL MODEL DESCRIPTION 03 Asphalt or Composition Shingle DESCRIPTION Aluminum/Vinyl Siding Drywall/Sheetrock Slab Above Grade 4 Spread Footing Heat Pump SIZE 12|Hardwood MOD 04 Electric **ATTACHMENTS** 03 Central Appraised By 00 on 01/01/2022 00324 OAKMONT SUBDIVISIO Gable ᄗ CODE SINGLE FAMILY RESIDENTIAL BASE **USE DESCRIPTION** Interior Wall Construction CATEGORY Air Conditioning Type Interior Floor Cover Roofing Structure Sub Floor System Half-Bathrooms Roofing Cover **Exterior Walls** Heating Type Heating Fuel Bathrooms Foundation Bedrooms USE 0

HEATED AREA 3,103 NOTES 808 OB/XF DEPR. New house for 2014 COND % OVR SCH DEP 2013 EYB 2013 AYB 96.0 i BLDG # ORIG % COND 100,00 16560 133224 PRICE 15.00 UNIT RPL CS UNITS WTH 0.9400 0.7400 0.9600 1.5600 H FACTOR COUNT 1,850 30,00 45.00 120.50 102.70 **BUILDING ADJUSTMENTS** RATE DESCRIPTION SHED 575 TOTAL OB/XF VALUE 1,753 402 **GS AREA** Fabricated FIREPLA 2 - Pre TYPE GRADE CODE

808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | 808 | LAND INFORMATION

HIGHEST AND BEST USE LOCAL FRONTAGE DEPTH LIND COND COND SIZE MOD FACT	USE	LOCAL	FRONTAGE	рертн	DEPTH / SIZE	LND	COND	OTHER ADJ/NOTES RF AC LC TO OT	ROAD	ROAD LAND UNIT	TOTAL LAND UNIT TOTAL UNITS TYPE ADJST	UNIT	TOTAL	ADJUSTED UNIT PRICE	LAND VALUE	OVERRIDE VALUE	LAND NOTES
SFR	0100	0100 RA-20R	0	0	1.1700	0	1.0000			63,000.00		0.810 AC	1.170	73,710.00	59705	0	
TOTAL MARKET LAND DATA	DATA	New County			THE STATE OF	100		ALLO TO THE R			0.81				59705		
TOTAL PRESENT USE DATA	ATA	1 2 0				X a											
03-0507004617- (7413892) Group:0	7- (7413	3892) Grc	0:dn													9/2/2022	9/2/2022 10:23:06 AM.