

Application # _____

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license. Harnett County Central Permitting
420 McKlnney Pkwy Llllington, NC 27546
PO Box 65 Lillington, NC 27546
910-693-7525 ext. 1 Fax 910-693-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Steve And IRMMy G	odw: N Date 10-6-23
Owner's Name: Steve and Tammy Go Site Address: 4169 OID Stage Road 5	Phone 910-308-3117
	Lot 0597-08-7389.000
Description of Proposed Work: TN Ground Pook	Total Job Cost 59, 271, 00
General Contractor Informatio	,
Parnell Pool & Spa	910- 720- 8117
Parnell Pool & Spa Building Contractor's Company Name	Telephone
1380 Linkhaw 2d Lumberton NC 28358	Telephone oloug@painellpoolandspa.com Email Address
Address	Email Address
68587 HEATED SQ FT GARAGES	OPT
License #	
Description of Work Wire Pool Equipment Service Size:	on Amps T-Pole: Yes ⊀ No
T Townsend Electric	910-818-8532
Trownsend Electric Electrical Contractor's Company Name	Telephone
535 Teds Road Parkton NC 28371	Wofford \$20 earthlink. NET
Address	Email Address
25451-L	
License #	
Mechanical/HVAC Contractor Inform	nauon
Description of Work	
Mechanical Contractor's Company Name	Telephone
,	releptione
Address	Email Address
	Email Address
License #	
License # Plumbing Contractor Information	<u>n</u>
License #	
License # Plumbing Contractor Information Description of Work	<u>n</u> _# Baths
License # Plumbing Contractor Information	<u>n</u>
License # Plumbing Contractor Information Description of Work	_# Baths Telephone
Plumbing Contractor Information Description of Work Plumbing Contractor's Company Name Address	<u>n</u> _# Baths
Plumbing Contractor Information Description of Work Plumbing Contractor's Company Name Address License #	Telephone Email Address
Plumbing Contractor Information Description of Work Plumbing Contractor's Company Name Address	Telephone Email Address
Plumbing Contractor Information Description of Work Plumbing Contractor's Company Name Address License #	Telephone Email Address

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

strong roots · new growth



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.

the to 2 years permit to 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 Date	
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.	
Sign w/Title: Naylar Jent VP Date:	

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 2014625

Filed on: 10/07/2023

Designated Lien Agent

Project Property

PIN # 0597-08-7839.000

4169 Old Stage Road S

Erwin, NC, NC 28339

Initially filed by: pps1380

Chicago Title Company, LLC

Online: www.lensnc.com

Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com

Property Type

12/15/2023

Other

Owner Information

Date of First Furnishing

Steve Godwin 4169 Old Stage Road S Erwin, NC 28339 United States

Email: stevegodwin1999@gmail.com Phone: 910-308-3117

Harnett County

Please post this notice on the Job Site.

Print & Post

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