

09/09/11

Application #

07.50016526 R

Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7625 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.

Application for Residential Building and Trades Permits



SCANNED

Owner's Name HHT Onsite Homes LLC Date _____
Site Address 29 Copper Loop Phone 910 486 4864
Directions to job site from Lillington _____

Subdivision Summit Lot 119
Description of Proposed Work Single Family Dwelling # of Bedrooms 04
Heated SF 2093 Unheated SF 673 Finished Bonus Room? No Crawl Space _____ Slab

General Contractor Information

HHT Onsite Homes LLC 910.486 4864
Building Contractor's Company Name Telephone
2919 Breezewood Ave STE 400 Fayetteville NC 28303 travinalove@hthomes.com
Address Email Address
73671-11
License #

Electrical Contractor Information

Description of Work SFD Electrical Service Size 200 Amps T-Pole Yes No
Carolina Comfort Air Inc. 919 550 2463
Electrical Contractor's Company Name Telephone
200 Emmett Rd. Dunn NC 28334 rebecca@carolinacomfortair.com
Address Email Address
24726
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC for SFD
Carolina Comfort Air Inc. 919 550 2463
Mechanical Contractor's Company Name Telephone
200 Emmett Rd. Dunn NC 28334 rebecca@carolinacomfortair.com
Address Email Address
29077
License #

Plumbing Contractor Information

Description of Work Plumbing for SFD # Baths _____
Carolina Plumber 919 550 7711
Plumbing Contractor's Company Name Telephone
5212 US Hwy 70 Bus W Clayton NC 27520 rebecca@carolinacomfortair.com
Address Email Address
13236
License #

Insulation Contractor Information

Tricity Insulation 910 486 8855
Insulation Contractor's Company Name & Address Telephone

*NOTE General Contractor 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

Date

9.16.14

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

Sign w/Title

Travina Love office manager

Date

9.16.14

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 188933

Filed on: 09/12/2014

Initially filed by: travinalove

Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com (mailto:support@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

LOT 119 THE SUMMIT
29 COPPER LOOP
SANFORD, NC 27332
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

HH Onsite Homes LLC
2919 Breezewood Ave
Ste 300
Fayetteville, NC 28303
United States
Email: travinalove@hhhomes.com
Phone: 910-486-4864

Date of First Furnishing

08/04/2014

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

Technical Support Hotline: (888) 690-7384

Plan Box # 03

Date 9/15/14

Job Name H+H onsite

App # 67-50016.526 Valuation \$160395 Heated SQ Feet 1998

Garage 470

= 2468

Inspections for SFD/SFA

Crawl

Slab

Mono ✓

Basement

Footing	Footing	Plum Under Slab	Footing
Foundation	Foundation	Ele. Under Slab	Foundation
Address	Address	Address	Waterproofing
Open Floor	Slab	Mono Slab	Plum Under slab
Rough In	Rough In	Rough In	Address
Insulation	Insulation	Insulation	Slab
Final	Final	Final	Open Floor
			Rough In
			Insulation
			Final

Foundation Survey ✓

Envir. Health new

Other

Additions / Other

Footing

Foundation

Slab

Mono

Open Floor

Rough In

Insulation

Final

* Attached garage