

\* Each section below to be filled out by whom ever performing work. Must be owner or licensed contractor. Address, company name & phone must match

Application # 12 500 29695

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

**Application for Residential Building and Trades Permit**

Owner's Name: STANCIL BUILDERS, INC. Date: \_\_\_\_\_  
Site Address: 497 COKESBURY PARK LN. Phone: 919-639-2073  
Directions to job site from Lillington: ... TAKE 401 TO FINGER TURN LEFT ON R.T. 42 GO THRU DIXON TURN LEFT ON COKESBURY SUB ON RT.  
Subdivision: COKESBURY PARK LN Lot: 45  
Description of Proposed Work: RESIDENTIAL New Home # of Bedrooms: \_\_\_\_\_  
Heated SF: \_\_\_\_\_ Unheated SF: \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space: \_\_\_\_\_ Slab: \_\_\_\_\_

**General Contractor Information**

STANCIL BUILDERS, INC. 919-639-2073  
Building Contractor's Company Name Telephone  
466 STANCIL Rd. ANGLER, NC 27501  
Address  
034533 Email Address  
License #

**Electrical Contractor Information**

Description of Work New Residential Service Size: 200 Amps T-Pole:  Yes  No  
SNO. ELECTRICAL 919 427 6952  
Electrical Contractor's Company Name Telephone  
19655-NC 210 Hwy ANGLER, NC  
Address 27501 Email Address  
13075-L  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New Res.  
STEPHENSON HVAC 919-329-0686  
Mechanical Contractor's Company Name Telephone  
343 SHIPWASH DR. GARNER,  
Address NC Email Address  
18644 H3-I  
License #

**Plumbing Contractor Information**

Description of Work New Res. # Baths \_\_\_\_\_  
BARNES PLUMBING 919-639-0935  
Plumbing Contractor's Company Name Telephone  
P.O. Box 1207 ANGLER, NC 27501  
Address \_\_\_\_\_ Email Address  
P17735  
License #

**Insulation Contractor Information**

TATUM INS. 519 OLDDRUGSTORE Rd. 919-661-0999  
Insulation Contractor's Company Name & Address Telephone  
GARNER, NC

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



### 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.

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

Date

4/29/2013

### 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: Stancil Builders, Inc.

Sign w/Title: [Signature] President Date: 4/26/13

15/1/513

15/1/513

15/1/513

15/1/513

**DO NOT REMOVE!**

## Details: Appointment of Lien Agent

**Entry #: 4856**

**Filed on: 04/19/2013**

**Initially filed by: StancilBuildersInc**

### Designated Lien Agent

Chicago 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)

### Project Property

Lot 45 Cokesbury Park Phase III Book  
2006 Page 854

497 Cokesbury Park Lane  
Fuquay Varina , NC 27526

**Tax Parcel ID:** 050635-0124-07

### Property Type

1-2 Family Dwelling

### Pre-Permit Workers

NONE

**Notification Alert Emails:**

1. [bgoldston@embarqmail.com](mailto:bgoldston@embarqmail.com)

### Owner Information

Stancil Builders Inc

466 Stancil Rd

Angier , NC 27501

Email: [bgoldston@embarqmail.com](mailto:bgoldston@embarqmail.com)

Phone: 919-639-2073

### Date of First Furnishing

2013-04-19

### Filing Notification Alerts

Filer Email 1:

[bgoldston@embarqmail.com](mailto:bgoldston@embarqmail.com)

### Contractor Information

# MEMORANDUM

TO : THE PRESIDENT

FROM : THE SECRETARY OF DEFENSE

SUBJECT: [Illegible]

1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

7. [Illegible]

8. [Illegible]

9. [Illegible]

10. [Illegible]

11. [Illegible]

12. [Illegible]

13. [Illegible]

14. [Illegible]

15. [Illegible]

16. [Illegible]

17. [Illegible]

18. [Illegible]

19. [Illegible]

Stancil Builders Inc  
466 Stancil Rd  
Angier, NC 27501  
**Email:** bgoldston@embarqmail.com  
**Phone:** 919-639-2073

## 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.



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





Color Copy Part # 45

Date 5-1-13

Plan Box # I-4

Job Name \_\_\_\_\_

App # 12500 29695

Valuation 111816

SQ Feet 1721

**Inspections for SFD/SFA**

Crawl X

Slab \_\_\_\_\_

Mono \_\_\_\_\_

Footling	Footling	Plumbing Under Slab
Foundation	Foundation	Ele. Under Slab
Address	Address	Address
Open Floor	Slab	Mono Slab
Rough In	Rough In	Rough In
Insulation	Insulation	Insulation
Final	Final	Final

>2500 \_\_\_\_\_

>2500 \_\_\_\_\_

>2500 \_\_\_\_\_

Foundation Survey No

Envir. Health New Tank

Other \_\_\_\_\_

**Additions / Other**

Footling \_\_\_\_\_

Foundation \_\_\_\_\_

Slab \_\_\_\_\_

Mono \_\_\_\_\_

Open Floor \_\_\_\_\_

Rough In \_\_\_\_\_

Insulation \_\_\_\_\_

Final \_\_\_\_\_

