

09/09/11

Application #

155003 6540

Harnett County Central Permitting

PO Box 86 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.

Application for Residential Building and Trades Permit

Owner's Name Onsite Homes LLC Date 8-14-18  
 Site Address 444 Fifty Caliber Dr. Broadway Phone 910-745-0001  
 Directions to job site from Lillington Buffalo Lake Rd. Rt on Alpine, left on Tingen, left on Strike Eagle, left on Bunker Buster, left onto Caliber Dr.  
444 Caliber Dr. Broadway, NC  
 Subdivisor Pattens Pointe Lot 029  
 Description of Proposed Work Single Family Dwelling # of Bedrooms 3  
 Heated SF 1736 Unheated SF 925 Finished Bonus Room?      Crawl Space      Slab X

General Contractor Information

onsite Homes LLC 910-745-0001  
 Building Contractor's Company Name Telephone  
2919 Breezewood Ave SE 400 Fay NC 28303  
 Address Email Address  
73671-4  
 License #

Electrical Contractor Information

Description of Work SFD Electrical Service Size 200 Amps T-Pole  Yes  No  
Southern Pride Electrical Service 919-750-9436  
 Electrical Contractor's Company Name Telephone  
370 Slapout Rd. Mt. Olive, NC Southernpride.mp@gmail.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 2.5  
Vance Johnson Plumbing 910-424-6712  
 Plumbing Contractor's Company Name Telephone  
3242 Mid Pine Rd. Fay, NC etdepher@vjplumbing.com  
 Address Email Address  
07756 P1  
 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 \$160 00 After 2 years re-issue fee is as per current fee schedule**

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

8.14.18  
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

Company or Name OnSite Homes, LLC

Sign w/Title Coyette Ford Date 8.14.18  
Production & QA manager

DO NOT REMOVE!

**Details: Appointment of Lien Agent**

Entry #: 902000

Filed on: 08/14/2018

Initially filed by: travina1

**Designated Lien Agent**

First American Title Insurance Company

Online: [www.liensnc.com](http://www.liensnc.com) / [www.fatire.com](http://www.fatire.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) / [web@fatire.com](mailto:web@fatire.com)

**Owner Information**

Onsite Homes LLC

2919 Breezewood Ave

Ste 300

Fayetteville, NC 28303

United States

Email: [travinalove@onsitehomesnc.com](mailto:travinalove@onsitehomesnc.com)

Phone: 910-745-0001

**Project Property**

LOT 29  
444 FIFTY CALIBER DR  
BROADWAY, NC 27505  
HARNETT County

**Property Type**

1-2 Family Dwelling

**Date of First Furnishing**

08/03/2018

**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