

09/09/11

Application #

1750041170

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

91189

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 Ivercon Inc. Date 5/31/18
Site Address Lot 56 - 138 Folly Ct. Phone 910.717.5076
Directions to job site from Lillington Hwy 210 on Elliott Grove Rd turn left. Left on Wm Lucas. Right onto Hybrid into Sweetwater Subd. Right on Rainmaker. Right on Folly Ct.
Subdivision Sweetwater Lot 56
Description of Proposed Work New Construction # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space _____ Slab

General Contractor Information

Ivercon, Inc.
Building Contractor's Company Name
PO Box 6778
Address
57917/LTD
License #

910-237-3461
Telephone
tray@ivercon.net
Email Address

Electrical Contractor Information

Description of Work NEW CONSTRUCTION Service Size 200 Amps T-Pole Yes No
SANDY RIDGE ELECTRIC
Electrical Contractor's Company Name
1ST WHITEHEAD RD. FAYETTEVILLE NC 28312
Address
NC05700-L
License #

910-323-2458
Telephone
diane@sandyridgeelectric.com
Email Address

Mechanical/HVAC Contractor Information

Description of Work NEW CONSTRUCTION
CERTIFIED HEATING & AIR.
Mechanical Contractor's Company Name
PO BOX 1071 HOPE Mills, NC 28348
Address
H3C1/20012
License #

910-8588-0000
Telephone
ETHAN.certified@gmail.com
Email Address

Plumbing Contractor Information

Description of Work NEW CONSTRUCTION
LANN LEE PLUMBING
Plumbing Contractor's Company Name
7051 CREST ST. FAYETTEVILLE NC 28306.
Address
05277 PL
License #

Baths 2 1/2
910-424-1766
Telephone
llee@lnc@aol.com
Email Address

Insulation Contractor Information

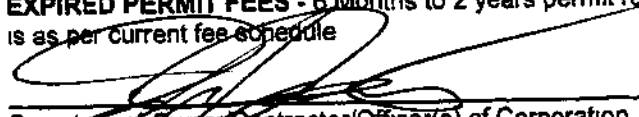
ATWZ INSULATION
Insulation Contractor's Company Name & Address
GARLAND NC 27529.

919-661-0999
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

1 June 2018
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 Intercom Inc.

Sign w/Title 

Date 1 June 2018

GAS CONTRACTOR
FOR GAS LOG FIRE PLACE
DIVERSIFIED ENERGY
17220 US Hwy 421 S. Durant, NC 28534-8757
Lic. # 31611 FP

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 860769

Filed on: 05/31/2018

Initially filed by: troy@ivercon.net

Designated Lien Agent

Investors Title Insurance Company

Online: www.itiensnc.com

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC
27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@itiensnc.com

Project Property

138 Folly Court
Linden, NC 28356
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

Ivercon, Inc.
PO Box 64778
Fayetteville, NC 28306
United States
Email: tj@ivercon.net
Phone: 910-717-5076

Date of First Furnishing

06/07/2018

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Technical Support Hotline: (888) 690-7384