

08/09/11

Application #

17-500-41456

Harnett County Central Permitting

PO Box 65 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 Wellons Realty Inc. Date 6-9-17

Site Address 65 Eaton Dr. Angier N.C. Phone _____

Directions to job site from Lillington Come out of Lillington, on 421 toward Dunn, turn left on Old Stage Rd, continue till you get to 55 Hwy, cross over go approx 3/4 Oxford Mills Sub. on left turn into sub., go to last Street
Subdivision Oxford Woods Lot 19

Description of Proposed Work SFD # of Bedrooms 3

Heated SF 1772 Unheated SF 506 Finished Bonus Room? Crawl Space _____ Slab

General Contractor Information

Wellons Realty Inc.
Building Contractor's Company Name
P.O. Box 730 Dunn N.C.
Address
7746 Unlimited
License #

910-892-3123
Telephone
dstephanson@wellonsrealty.com
Email Address

Electrical Contractor Information

Description of Work SFD Service Size 200 Amps T-Pole Yes No

Jason Pope Electrical
Electrical Contractor's Company Name
81 Beaver Creek Drive Dunn
Address
27284 U
License #

919-820-0837
Telephone
jhp@electrical@hotmail.com
Email Address

Mechanical/HVAC Contractor Information

Description of Work SFD
S+M HVAC
Mechanical Contractor's Company Name
724 Turlington Rd. Dunn N.C.
Address
17164
License #

910-897-5501
Telephone
jandmhvac@centurylink.net
Email Address

Plumbing Contractor Information

Description of Work SFD
Wagner plumbing
Plumbing Contractor's Company Name
555 Tirzah Rd Lillington N.C.
Address
315760
License #

Baths 2
910-890-2299
Telephone
wagnerplumbingco@yahoo.com
Email Address

Insulation Contractor Information

Tri-City Insulation
Insulation Contractor's Company Name & Address

910-486-8855
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]
Signature of Owner/Contractor/Officer(s) of Corporation

6-9-17
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 Wellons Realty Inc.

Sign w/Title *[Signature]* Superintendent Date _____

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 667273

Filed on: 06/09/2017

Initially filed by: WellonsR

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com www.wellons.com

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

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com info@wellons.com

Project Property

Oxford Woods Subdivision Old Stage Road
65 ~~Easton~~ Drive *Eaton*
Angier, NC 27501
Harnett County
Lot 19

Property Type

1-2 Family Dwelling

Date of First Furnishing

06/21/2017

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

Wellons Realty, Inc.

P.O. Box 730

Dunn, NC 28335

United States

Email: dilucas@wellonsconstruction.com

Phone: 910-892-3123

View Comments (0)

Technical Support Hotline: (888) 690-7384