

09/09/11

Application #

1750041557

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 Precision Custom Homes and Renovations, LLC Date 7/5/17

Site Address \_\_\_\_\_ Phone \_\_\_\_\_

Directions to job site from Lillington 27W to 87N, Lon Milton Welch Rd., Ran Summerlin Dr.

Subdivision Summerlin (30 Apache Trail) Lot 1

Description of Proposed Work New SFR Construction # of Bedrooms 4

Heated SF 2059 Unheated SF 494 Finished Bonus Room? \_\_\_\_\_ Crawl Space \_\_\_\_\_ Slab X

**General Contractor Information**

Building Contractor's Company Name SMG Precision Properties LLC

Telephone 910-988-8172

Address 256 Briar Hill Rd. Raeford NC

Email Address shaun@precisionpropertiesnc.com

License # 72380

**Electrical Contractor Information**

Description of Work New Const. Service Service Size 200Amps T-Pole  Yes  No

Electrical Contractor's Company Name J. Melvin Electric

Telephone 910-584-4255

Address 5960 Lakeway Dr. Fayetteville NC 28304

Email Address \_\_\_\_\_

License # 29258-L

**Mechanical/HVAC Contractor Information**

Description of Work New construction Performance Heating and Air Telephone 910-273-1826

Mechanical Contractor's Company Name 5217 Hornbeam Rd. Fayetteville NC 28304

Email Address \_\_\_\_\_

License # 29759H23-1

**Plumbing Contractor Information**

Description of Work New construction as per plans # Baths \_\_\_\_\_ Telephone 910-303-5585

Plumbing Contractor's Company Name Trinity Plumbing Co LLC

Email Address \_\_\_\_\_

License # 32324 P1

**Insulation Contractor Information**

Insulation Contractor's Company Name & Address A-1 Insulation Inc. PO Box 180 Hope Mills NC Telephone \_\_\_\_\_

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

Application # 12504.227

Hamber County Central Planning  
PO Box 65 Livingston, TN 37080  
910 603 7222 Fax 910 603 7203 www.hambercountypg.com

Each section below to be filled out  
by applicant detailing work  
to be done in contract.  
Contractor Address company  
name & phone number

Application for Residential Building and Trade Permit

Owner Name: Precision Custom Homes and Renovations, LLC Date: 12/17

Site Address: 1001 1st St N, Livingston, TN 37080

Proposed Use: Residential

Description of Proposed Work: Alter 27R Construction

Heated SF: 2022 Unheated SF: 0

Finished Basement:  Craw Space:  Slab:

General Contractor Information:

Company Name: SMC Precision Properties, LLC

Address: 526 Birch Hill Rd, Rocky Hill, TN 37878

Telephone: 910-888-8175

Email Address: smprecisionproperties@gmail.com

License #: 12320

Electrical Contractor Information:

Contractor Name: J. Taylor Electric

Address: 2910 Lakeway Dr, Fayetteville, TN 37068

Telephone: 910-284-4223

Service Area:  New Const  Service Area  To Amend:  Yes  No

License #: 5828-J

Mechanical/VAC Contractor Information:

Description of Work: New Construction

Mechanical Contractor Company Name: J. Taylor Electric

Address: 2910 Lakeway Dr, Fayetteville, TN 37068

Telephone: 910-52-1232

License #: 5828472-1

Plumbing Contractor Information:

Description of Work: New Construction as per plans

Plumbing Contractor Company Name: Taylor Plumbing Co LLC

Address: 1232 Livingston Hwy, Fayetteville, TN 37068

Telephone: 910-312-2282

License #: 3232471

Insulation Contractor Information:

Insulation Contractor Company Name & Address: A-T Insulation Inc, PO Box 120, Hwy 117, TN

Telephone: 910-312-2282

NOTE: General Contractor must fill out and sign the second page of the 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

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

7/5/17  
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 SMG Precision Properties

Sign w/Title Shawn D Shaun Gardner / Member Manager Date 7/5/17



**DO NOT REMOVE!****Details: Appointment of Lien Agent**

Entry #: 679520

Filed on: 06/29/2017

Initially filed by: shaungardner

**Designated Lien Agent**

Old Republic National Title Insurance Company

**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 1 Summerlin  
30 Apache Trail  
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**Precision Custom Homes and Renovations, LLC  
256 Briar Hill Rd.  
Raeford, NC 28376  
United States  
Email: [shaun@precisionpropertiesnc.com](mailto:shaun@precisionpropertiesnc.com)  
Phone: 910-988-8172**Date of First Furnishing**

07/10/2017

[View Comments \(0\)](#)**Technical Support Hotline:** (888) 690-7384

# Details: Appointment of Lien Agent

Case #: 0522013013

## Project Property

1 of 1 Samson  
30 Acadia Ln  
Salem, NC 28782  
Harris County

## Designated Lien Agent

Old Republic Insurance Company  
10000 Old Republic Rd  
Salem, NC 28782

## Property Type

1-2 Family Dwelling

## Owner Information

Proton Capital Home and Renovations LLC  
10000 Old Republic Rd  
Salem, NC 28782  
United States  
Email: proton@proton.com  
Phone: 704-872-1111

## Date of First Furnishing

07/02/13

Technical Support Hotline: (888) 980-3384

DO NOT REMOVE!

http://app.license.com/appointment/details.html?caseNo=

Filed on: 05/29/13  
Initially filed by: arrandana

## Print & Post



Contractors:  
Please post this notice to the job site.  
Suppliers and subcontractors:  
Search this page with your company name to  
view this time for can be used to  
to Lien Agent for this project.