

Harnett County Central Permitting
PO Box 66 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 Triangle Home Pros LLC Date 5/4/2017
Site Address 817 Cokesbury Park LN Phone 919-346-1528
Directions to job site from Lillington Hwy 401 N - Then L on Christian Light Rd - Then Left on Cokesbury Rd - Then L onto Cokesbury Park LN to House location
Subdivision Cokesbury Park Lot # 67
Description of Proposed Work New single family Home # of Bedrooms 3
Heated SF Unheated SF Finished Bonus Room? NO Crawl Space X Slab

General Contractor Information

Triangle Home Pros 919-346-1528
Building Contractor's Company Name Telephone
6312 Laurence LN, Fuquay Varina NC 27526 THP Homes@gmail.com
Address Email Address
77019
License #

Electrical Contractor Information

Description of Work Wirc New SFH Service Size 200 Amps T-Pole X Yes No
NEC Power 919-812-6624
Electrical Contractor's Company Name Telephone
7309 Liselin Woods LN Fuquay Varina MNiclaus@NECpower.com
Address NC 27526 Email Address
28370U
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC New SFH
JC'S Heating & Air 919-552-3053
Mechanical Contractor's Company Name Telephone
1539 Wade Stephenson Holly Springs JCSHVAC@gmail.com
Address NC 27540 Email Address
H3-12655
License #

Plumbing Contractor Information

Description of Work Plumb New SFH # Baths 2
All-Max Plumbing 919-678-0111
Plumbing Contractor's Company Name Telephone
2428 Reliance Ave, Apex NC 27539 vicky@All-MaxPlumbing.com
Address Email Address
29022
License #

Insulation Contractor Information

All Pro Insulation 919-554-9004
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 \$150.00 After 2 years re-issue fee is as per current fee schedule.


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

8/22/2017
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

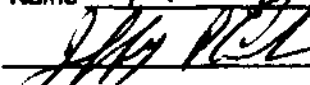
Has three (3) or more employees and has obtained workers compensation insurance to cover them

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 Triangle Home Pros LLC
Sign w/Title  President Date 8/22/2017

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 695860

Filed on: 07/31/2017

Initially filed by:

bryan.thphomes@gmail.com

Designated Lien Agent

Chicago Title Company, LLC

Online: 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

Project Property

[REDACTED]
Fuquay Varina, NC 27526
Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

08/01/2017

Owner Information

Triangle Home Pros, LLC

6312 Lauraca Ln

Fuquay Varina, NC 27526

United States

Email: bryan.thphomes@gmail.com

Phone: 919-346-1528

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