Application # 17-500419128

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

Each section below to be filled out by whomever performing work Must be owner or ilcensed contractor Address company name & phone must match

## Application for Residential Building and Trades Permit

Owners Name McKee Homes, LLC	Date 8/29/17
Site Address 99 Countryside Drive	Phone 910-475-7100
Directions to job site from Lillington 127 to Docs Road, develo	opment on the left
Subdivision Oakmont Valley View	Lot <u>96</u>
Description of Proposed Work Single Family Home	# of Bedrooms 4
Heated SF 3357 Unheated SF 1153 Finished Bonus F General Contractor Int	
GML Development, Inc	910-475-7100,727
Building Contractor's Company Name	Telephone
109 Hay Street, Ste 301, Fayetteville, NC 28301	krivera@mckeehomesnc.com
Address	Email Address
63970	
License #	_
Electrical Contractor in	
Description of Work Single Family Home Serv  J.M. Pope Electric	/ice Size 200 Amps T-Pole V Yes No 919-776-5144
Electrical Contractor's Company Name	Telephone
409 Chatham St., Sanford, NC 27330	jmpopeelectric@gmail.com
Address	Email Address
21326-L	Email Address
License #	
Mechanical/HVAC Contract	or information
Description of Work Single Family Homes	
Certified Heating & Air	910-858-0000
Mechanical Contractor's Company Name	Telephone
P.O. Box 1071, Hope Mills, NC 28348	certifiedheatair@embarqmail.com
Address	Email Address
20012- H3-1	Ellian / Wall odd
License #	
Plumbing Contractor In	<u>vformation</u>
Description of Work Single Family Home	# Baths 3.5
Dell Haire Pluming	910-818-4863
Plumbing Contractor's Company Name	Telephone
7612 Documentary Drive, Fayetteville, NC 28306	dellhaireplumbing@hotmail.com
Address	Email Address
32886 P1	
License #	
insulation Contractor in	<u>nformation</u>
Cumberland Insulation	910-484-7118
Insulation Contractor a 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 Hamett 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.

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	sue les 15 5 150 00 Aller 2 years le-issue les
Kelsey Rivera Outc. 2017 08 29 14 16 10	8/29
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compe The undersigned applicant being the	nsation N C G S 87-14
X General Contractor Owner Of	ficer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person set forth in the permit	n(s) firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained w	vorkers compensation insurance to cover them
Has one (1) or more subcontractors(s) and has obtain	ned workers compensation insurance to cover
$\frac{X}{\text{covering themselves}}$ Has one (1) or more subcontractors(s) who has their covering themselves	own policy of workers compensation insurance
Has no more than two (2) employees and no subcont	ractors
White working on the project for which this permit is sought a Department issuing the permit may require certificates of corto issuance of the permit and at any time during the permitted carrying out the work.	verage of worker's compensation insurance prior
Company or Name McKee Homes, LLC	
Sign w/Title Kelsey Rivera Digitally signed by Kelsey Rivers Date: 2017.08.28 14 15.29 -04/07	Date 8/29/17

## DO NOT REMOVE!

# **Details: Appointment of Lien Agent**

Entry #: 712147

Filed on: 08/29/2017

initially filed by: jbuckwalter

## Designated Lien Agent

First American Title Insurance Company

Online: www.hensnc\_com thup\_www.home.com

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

27601

Phone: 888-690-7384
Fax: 913-489-5231

Email: support@liensac.com

#### Project Property

Oakmont Lot 96 Harnett County

**Date of First Furnishing** 

NC

#### Property Type

1-2 Family Dwelling

### Contractors:

Please post this notice on the Job Site.

#### Suppliers and Subcontractors:

Print & Post

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

McKee Homes, LLC 109 Hay Street Suite 301 Faveneville, NC 2830

Fayetteville, NC 28301

United States

Email: krivera@mckeehomesnc.com

Phone. 910-475-7100

09/11/2017

View Comments (0)

Technical Support Hotline: (888) 690-7384