

09/09/11

Application # \_\_\_\_\_

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 \_\_\_\_\_ Date \_\_\_\_\_  
Site Address \_\_\_\_\_ Phone \_\_\_\_\_  
Directions to job site from Lillington \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work New Construction # of Bedrooms \_\_\_\_\_  
Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? \_\_\_\_\_ Crawl Space \_\_\_\_\_ Slab \_\_\_\_\_

**General Contractor Information**

Weaver Homes, Inc Telephone 910-630-2100  
Building Contractor's Company Name  
350 Wagoner Drive Fayetteville, NC 28303 rlb1971@aol.com  
Address Email Address  
75971

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work New Service Size \_\_\_\_\_ Amps T-Pole  Yes  No  
Jim Pope Electric Telephone 910-890-1060  
Electrical Contractor's Company Name  
409 Chatham St. Sanford, NC 27330  
Address Email Address  
21326

License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work New  
Mainstream Mechanical Telephone 919-291-0450  
Mechanical Contractor's Company Name  
412 Lazy Branch Dr. Benson, NC 27504  
Address Email Address  
31005

License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work New # Baths \_\_\_\_\_  
Samir Johnson Plumbing Telephone 910-814-7705  
Plumbing Contractor's Company Name  
614 Byrd Rd. Benson, NC 27323  
Address Email Address  
21649

License # \_\_\_\_\_

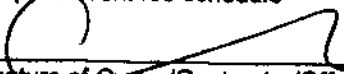
**Insulation Contractor Information**

Insulation, Inc. Telephone 919-770-1974  
Insulation Contractor's Company Name & Address

\*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

3/20/16  
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 WEAVER HOMES, INC.

Sign w/Title  Date 3/20/16

9/24/17

CenturyLink Webmail

nmcleodjr@embarqmail.com

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**LiensNC Notice of Appointment of Lien Agent - Address: 275 Fairfax Ave,  
Sanford, 27332**

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**From :** LiensNC Support <donotreply@liensnc.com> Tue, Oct 10, 2017 01:36 PM  
**Subject :** LiensNC Notice of Appointment of Lien Agent -  
Address: 275 Fairfax Ave, Sanford, 27332

A(n) Appointment of Lien Agent was filed on October 10, 2017, 01:36:17 PM using the North Carolina Online Lien Agent System (LiensNC). Details of this filing include:

**Project Property**

Lot 19 Pittman Crossing  
275 Fairfax Ave  
Sanford, NC 27332  
Harnett County

Entry Number: [736056 \(entry search, view related filings\)](#)

Date of Filing: October 10, 2017, 01:36:17 PM

**Lien Agent**

First American Title Insurance Company

**Online:** [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)

**Owner Information**

Weaver Homes Inc.  
350 Wagoner Drive  
Fayetteville, NC 28303  
United States Email: [nmcleod@weavercompanies.com](mailto:nmcleod@weavercompanies.com)  
Phone: 910-433-0888

**Design Professionals**

**Date of First Furnishing**

October 13, 2017

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