

09/09/11

Application #

1750042434

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 Renea Puckett Date 12-14-17
Site Address 5098 NC 27E Coats N.C. 27521 Phone 919-302-9154
Directions to job site from Lillington 421 South to HW 27 E

Subdivision NA Lot _____
Description of Proposed Work New Const. # of Bedrooms _____
Heated SF _____ Unheated SF _____ Finished Bonus Room? _____ Crawl Space Slab _____

General Contractor Information

Stand Sure Custom Homes 910-890-6870
Building Contractor's Company Name Telephone
P.O. Box 1072 Coats N.C. 27521 Stand Sure Homes@gmail.com
Address Email Address
70299
License #

Electrical Contractor Information

Description of Work New Const. Service Size _____ Amps T-Pole Yes _____ No
Jason H Pole Electrical Contractors 919-820-0837
Electrical Contractor's Company Name Telephone
81 Beaver Creek Dr. Dunn N.C. 28334
Address Email Address
27284
License #

Mechanical/HVAC Contractor Information

Description of Work New Const.
A.C. Mann Heating and Air conditioning 910-797-4287
Mechanical Contractor's Company Name Telephone
1817 Geiberger Dr 28303
Address Email Address
31632
License #

Plumbing Contractor Information

Description of Work New Const. # Baths _____
Glover Contract Plumbing 919-868-0959
Plumbing Contractor's Company Name Telephone
304 Quail Hollow Way Sanford N.C.
Address Email Address
27332 23160 P1
License #

Insulation Contractor Information

Cumberland Insulation Co Inc 910-484-7118
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

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

12-17-17
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 _____

Sign w/Title Chad Anderson owner Date 12-17-17

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 772200

Filed on: 12/19/2017

Initially filed by: StandSure

Designated Lien Agent

Chicago Title Company, LLC

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>)

Project Property

Chad Anderson Anderson
5098 NC 27 East
Coats, NC 27521
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

Chad Anderson
P.O. Box 1072
Coats, NC 27521
United States
Email: standsurehomes@gmail.com
Phone: 910-890-6870

[View Comments \(0\)](#)

Technical Support Hotline: (888) 690-7384

HARNETT COUNTY CENTRAL PERMITTING

P.O. BOX 65

LILLINGTON, NC 27546

For Inspections Call: (910) 893-7525 Fax: (910) 893-2793

Bldg Insp scheduled before 2pm available next business day.

Application Number 17-50042434
 Property Address 42643 *UNASSIGNED
 PARCEL NUMBER 07-1600- - -0213- - -
 Application description . . . CP NEW RESIDENTIAL (SFD)
 Subdivision Name
 Property Zoning COATS

Page 2
 Date 12/19/17

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT

Additional desc . .
 Phone Access Code . 1212984

Required Inspections

Seq	Phone Insp#	Insp Code	Description	Initials	Date
10-30	814	A814	ADDRESS CONFIRMATION	_____	___/___/___
10	101	B101	R*BLDG FOOTING / TEMP SVC POLE	_____	___/___/___
20	103	B103	R*BLDG FOUND & TEMP SVC POLE	_____	___/___/___
30-999	111	B111	R*BLDG SLAB INSP/TEMP SVC POLE	_____	___/___/___
30-999	309	P309	R*PLUMB UNDER SLAB	_____	___/___/___
30-999	205	E205	R*ELEC UNDER SLAB	_____	___/___/___
40-50	129	I129	R*INSULATION INSPECTION	_____	___/___/___
40-60	425	R425	FOUR TRADE ROUGH IN	_____	___/___/___
40-60	125	R125	ONE TRADE ROUGH IN	_____	___/___/___
40-60	325	R325	THREE TRADE ROUGH IN	_____	___/___/___
40-60	225	R225	TWO TRADE ROUGH IN	_____	___/___/___
50-60	429	R429	FOUR TRADE FINAL	_____	___/___/___
50-60	131	R131	ONE TRADE FINAL	_____	___/___/___
50-60	329	R329	THREE TRADE FINAL	_____	___/___/___
50-60	229	R229	TWO TRADE FINAL	_____	___/___/___
50-60	209	E209	R*ELEC TEMP POWER CERT	_____	___/___/___
999		H824	ENVIR. OPERATIONS PERMIT	_____	___/___/___

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PARCEL NUMBER 07-1600- - -0213- - -
Application type description CP NEW RESIDENTIAL (SFD)
Subdivision Name
Property Zoning COATS

Owner Contractor

PUCKETT WILLIAM B & RENAE L STAND SURE CUSTOM HOMES INC
2645 OXFORD DRIVE PO BOX 1072
APEX NC 27539 COATS NC 27521
(910) 890-6870

Applicant

PUCKETT RENAE

(919) 302-9154

--- Structure Information 000 000 138X119 5BD 4.5BA SLAB W/GAR FUT STRUCT
Flood Zone FLOOD ZONE X
Other struct info # BATHS 4.5
BEDROOMS 5.00
PROPOSED USE SFD
SEPTIC - EXISTING? NEW TANK
WATER SUPPLY COUNTY

Permit BLDG,MECH,ELEC,PLB,INSU PERMIT
Additional desc
Phone Access Code 1212984
Issue Date 12/19/17 Valuation 0
Expiration Date 12/19/18

Special Notes and Comments
T/S: 10/02/2017 03:52 PM BPETRICH --
NC 55 TO 27E - GO 1.1 MILES AND THE LOT
WILL BE ON THE RIGHT. OLD ADDRESS WAS
5098 NC 27E COATS 27521
PREMISE# 09047824
XX
PERMIT INCLUDES BLDG,ELEC,MECH,PLUMB
INSULATION AND LAND USE.
XX
Work must conform and comply with the
STATE BUILDING CODE and all other State
and local laws, ordinances & regulations

HARNETT COUNTY CASH RECEIPTS

*** CUSTOMER RECEIPT ***

Oper: LLUCAS Type: CP Drawer: 1
Date: 12/19/17 53 Receipt no: 192635

Year	Number	Amount
2017	50042434	
42643	*UNASSIGNED	
COATS, NC	27521	
B1	BP - PERMIT FEES	\$1524.00

RENAE PUCKETT

Tender detail		
CK CHECK PAYMEN	1007	\$1524.00
Total tendered		\$1524.00
Total payment		\$1524.00

Trans date: 12/19/17 Time: 15:50:59

** THANK YOU FOR YOUR PAYMENT **