

09/09/11

Application #

42462

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 Mike Bralstead Date 11/8/17
Site Address Rayner McComb Rd. Brantley 28323 Phone 919 612 5405
Directions to job site from Lillington 210, Left on Elliot Bridge Rd, Left on Rayner McComb property on Right

Subdivision _____ Lot _____
Description of Proposed Work New Home # of Bedrooms 4
Heated SF 2525 Unheated SF 850 Finished Bonus Room? Crawl Space _____ Slab

General Contractor Information

Red Door Homes Telephone 919 484 7770
Building Contractor's Company Name
142 Shenstone Blvd. Garner, NC 27529 Email Address Brandon@reddoorhomesnc.com
Address 69945
License # _____

Electrical Contractor Information

Description of Work New Construction Service Size 200 Amps T-Pole Yes No
Sandy Ridge Electric Telephone 910 323 2458
Electrical Contractor's Company Name
454 Whitehead Rd. Fayetteville 28312 Email Address _____
Address V100064
License # _____

Mechanical/HVAC Contractor Information

Description of Work Heat Pump
Carolina Comfort Air Telephone 919 550 7711
Mechanical Contractor's Company Name
PO Box 190 Clayton, NC 27528 Email Address _____
Address 20575
License # _____

Plumbing Contractor Information

Description of Work New Construction # Baths 2
P Vance Johnson Plumbing Company Telephone 910 424 6712
Plumbing Contractor's Company Name
3242 Mid Pine Rd. Fayetteville, NC 28306 Email Address _____
Address RR 7756
License # _____

Insulation Contractor Information

Cumberland Insulation Telephone 910 484 7118
Insulation Contractor's Company Name & Address 4805 Clinton Rd. Fayetteville 28312

*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

11/8/17
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

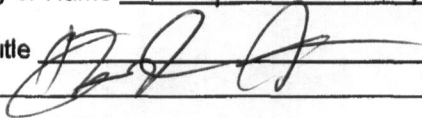
Has one (1) or more subcontractors(s) and has obtained workers compensation insurance to cover them

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 Red Door Homes

Sign w/Title 

Date 11/8/17

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 750562

Filed on: 11/06/2017

Initially filed by: Reddoorhomes4002

Designated Lien Agent

Investors 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>)

Project Property

09-367 Brailsford PIN: 0556-01-4139,000 Deed
BK/PG: 1876/0280
TBD Raynor McLamb Road
Bunnlevel, NC 28323
Harnett County

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.

Property Type

1-2 Family Dwelling

Owner Information

Michael & Carole Brailsford
1046 Loop Road
Clayton, NC 27527
United States

Email: Michael.brailsford@unchealth.unc.edu
Phone: 919-612-5405

Date of First Furnishing

11/20/2017

View Comments (0)

Technical Support Hotline: (888) 690-7384