

09/09/11

Application #

17-50042611

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 Ivercon Inc. Date 11/21/17
Site Address 132 Folly Court, Linden NC 28556 Phone 910-237-3461
Directions to job site from Lillington _____

Subdivision Sweetwater Lot 57
Description of Proposed Work New Construction # of Bedrooms _____
Heated SF 1947 Unheated SF 591 Finished Bonus Room? NO Crawl Space _____ Slab X

General Contractor Information
Building Contractor's Company Name Ivercon, Inc. Telephone 910-237-3461
Address PO Box 6778 Email Address tray@ivercon.net
57917/LTD
License # _____

Electrical Contractor Information
Description of Work New Construction Service Size 200 Amps T-Pole Yes No
Electrical Contractor's Company Name Sandy Rock Electric Telephone 910-323-2458
Address 451 Whitehead Rd. Fayetteville NC 28312 Email Address diane@sandyrockelectric.com
License # NC08700-L

Mechanical/HVAC Contractor Information
Description of Work New Construction
Mechanical Contractor's Company Name Certified Heating & Air Telephone 910-858-0000
Address PO Box 1071 Hope Mills, NC 28348 Email Address EMHIN.certified@gmail.com
License # H3C1/20012

Plumbing Contractor Information
Description of Work New Construction # Baths 2 1/2
Plumbing Contractor's Company Name Larry Lee Plumbing Telephone 910-424-1766
Address 7051 Cedar St. Fayetteville NC 28306 Email Address lleeplum@aol.com
License # 05277 PL

Insulation Contractor Information
Insulation Contractor's Company Name & Address Howz Insulation. 519 Old Dang Street Ln. Garner NC 27529 Telephone 919-661-0999

*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

 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 *Ivancon, Inc.*

Sign w/Title _____ Date _____

GAS CONTRACTOR
 FOR GAS LOG FIRE PLACE
 DIVERSIFIED ENERGY
 17220 US Hwy 421 S. Durant, NC 28334-8757
 Lic. # 31611 FP

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 759486

Filed on: 11/22/2017

Initially filed by: troy@ivercon.net

Designated Lien Agent

Investors Title Insurance Company

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

132 Folly Court
Linden, NC 28356
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

Ivercon, Inc.
PO Box 64778
Fayetteville, NC 28306
United States
Email: tj@ivercon.net
Phone: 910-717-5076

Date of First Furnishing

11/29/2017

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Technical Support Hotline: (888) 690-7384