Application #

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

17-500 42612

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Application for Residential Bui	lding and Trades Permit	1
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THE ECON INC.		Date 11/21/17
	NC 28356 Phone	910-237-3461
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General Contracto	or Information	>7 28/1
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Address /	1000	
	Mechanical/HVAC Constructors Company Name  Mechanical/HVAC Construct	Phone from Lillington  Lot sed Work  New Construction  Finished Bonus Room?  General Contractor Information  ALL Company Name  CTT &  Electrical Contractor Information  ALL Company Name  CTT &  Electrical Contractor Information  ALL Email Address  Phone  Telephone  Telephone

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 Affidavit for Worker's Compensation N C G S 87-14 The undersigned applicant being the Owner \_\_\_\_\_ Officer/Agent of the Contractor or Owner General Contractor 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

GAS CONTRACTOR.

FOR GAS LOG FIRE PLACE

DIVERSIFIED ENERGY

17220 US HWY 421 5. DUNN, NC 25833

LICIT 31611 FP

## DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 759469

Filed on: 11/22/2017

Initially filed by: troy@ivercon.net

# Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com (http://www.liensn

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

27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (mailto support

#### **Project Property**

118 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

View Comments (0)

Technical Support Hotline: (888) 690-7384