

09/09/11

Application #

17-50042846

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 David Bivins Date \_\_\_\_\_  
Site Address 157 Twin Fields Dr. FOGDAY VARIANA Phone 919 612 4217  
Directions to job site from Lillington HOLDN left on Piney Grove Rawls changes to Piney Grove Willow L on 42 west L on Oakridge DUKAN L on Twin Fields Lot 13 157 Twin Fields in cul-de-sac on left  
Subdivision Austin Farms Lot 13  
Description of Proposed Work Single family new # of Bedrooms 3  
Heated SF \_\_\_\_\_ Unheated SF \_\_\_\_\_ Finished Bonus Room? no Crawl Space  Slab \_\_\_\_\_

**General Contractor Information**

Same as owner  
Building Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Email Address dlbivins@gmail.com  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work \_\_\_\_\_ Service Size \_\_\_\_\_ Amps T-Pole  Yes \_\_\_\_\_ No \_\_\_\_\_  
Cold South Mechanical 919-800-7918  
Electrical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address 1929 N.C. 42 Hwy Willow Springs NC 27592 Email Address csj@coldsouthnc.com  
306240  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work \_\_\_\_\_  
Ed Beiers Heating & Air Inc. 919 291-0322  
Mechanical Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address P.O. Box 1188 Foggday, NC 27536 Email Address Ram.Serna1@gmail.com  
16968  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work \_\_\_\_\_ # Baths 2  
Pooler Plumbing Inc. 919-661-6334  
Plumbing Contractor's Company Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address 200 Timberland Court Garner, NC 27529 Email Address Ron Paul Pooler Plumbing .com  
21404  
License # \_\_\_\_\_

**Insulation Contractor Information**

Prime Energy Group 2300 Westinghouse Blvd Raleigh 27604 919-821-3288  
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

David Bivins  
Signature of Owner/Contractor/Officer(s) of Corporation

11/29/17  
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 David Bivins

Sign w/Title David Bivins owner Date 11/29/17

**DO NOT REMOVE!****Details: Appointment of Lien Agent**

Entry #: 763262

Filed on: 11/30/2017

Initially filed by: DavidBivins62

**Designated Lien Agent**

Fidelity National 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**lot 13 austin farms  
157 twin fields dr fuquay nc 27526  
fuquay, NC 27526  
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.

**Owner Information**david bivins  
1025 lenoxplace circle  
raleigh, NC 27603  
United States  
Email: [dlbivins@gmail.com](mailto:dlbivins@gmail.com)  
Phone: 919-612-4217**Property Type**

1-2 Family Dwelling

**Date of First Furnishing**

11/29/2017

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Technical Support Hotline: (888) 690-7384