Application #

Harnett County Central Permitting
PO Box 65 Lilington 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

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Owners Name Triangle Home Prostle	Date 2/1/21/8
Site Address 450 Cokesbury Park LN	Phone 9/9-346-1528
Directions to job site from Lillington Hay 40/ w-Left	on Christian Light-
Left on Cokesbury R.d - Then Left	onto Cokesbury PaRM
LN +0 450	
Subdivision Cokesbury Park	Lot
Description of Proposed Work New SFH	# of Bedrooms 3
Heated SF 1677 Unheated SF 439 Finished Bonus Room?	NO Crawl Space X Slab
General Contractor Information	
Triangle Home Pros LLC	919-346-1528
Building Contractor's Company Name	Telephone
Building Contractor's Company Name 63/2 Lauraca LN Fuguray Valing NC 27526	THPHOMESQ Gma, 1. COM
Address	Email Address
77019	
License #	
Description of Work Wire New SFH Service Size	200_Amps T-Pole YesNo
Dawson's Electric Inc	919-552-0246
Electrical Contractor's Company Name	Telephone ,
609 Cotton Rd Fugury Varing NC 27526	Traviso dawsons Electric. con
Address	Email Address
25948-L	
license #	
Mechanical/HVAC Contractor inform	
Description of Work J.C. 5 Heating & Air HVA	IC NEW SFH
J.C. S Heating & Air	9/9-552-3053 Telephone TCSHVAC@6-Mail.com
Mechanical Contractor's Company Name	Telephone
1539 Wade Stephenson Holly Springs NC	JCSHVACQ6-Mail.Com
Address	Email Address
H3-12655	
Linguis #	
Plumbing Contractor Informati	<u>on</u>
Description of Work Plumb New SFH	# Baths 2 //2
All-Max Plumbing Plumbing Contractor's Company Name	4/9-678-0//
Plumbing Contractor's Company Name	relephone
7428 Relliance Ave, April NC 27539	Telephone Vicky@All-Maxplusing. com
Address	Elligi Address
29022	
License # Insulation Contractor Informat	ion .
Stephen 5 Building Product 5 1220 Corporation Insulation Contractor's Company Name & Address Parkway Ralege	919-937-8479
STEPHEND BUILDING I TOQUEL DISTURDED	Telephone
Insulation Contractor's Company Maine a Address Palikman Italian	•

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.

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 // Owner/Contractor/Officer(s) of Corporation 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 Triangle Home Pros LLC Company or Name Sign w/Title

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 790438

Filed on: 01/29/2018
Initially filed by:
bryan.thphomes@gmail.com

Designated Lien Agent

Project Property

Print & Post

Chicago Title Company, LLC

. 450 Cokesbury Park Ln Fuquay Varina, NC 27526 Harnett County

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

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

27601

Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com (mailto:support@liensnc.com)

Property Type

1-2 Family Dwelling

02/12/2018

Owner Information

Date of First Furnishing

Triangle Home Pros, LLC 6312 Lauraca Ln Fuquay Varina, NC 27526 United States

Email: bryan.thphomes@gmail.com

Phone: 919-346-1528

Contractors:

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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.

View Comments (0)

Technical Support Hotline: (888) 690-7384