

09/09/11

Application #

18-5-43341

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 Cullen & Laurie Matthews Date 5-8-2018  
Site Address 641 HARVELL RD, COATS NC 27521 Phone 910-890-1354  
Directions to job site from Lillington \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work New SFD # of Bedrooms 4  
Heated SF 2013 Unheated SF 845 Finished Bonus Room? NO Crawl Space  Slab

**General Contractor Information**

FREEDOM Constructors Inc 910-892-1231  
Building Contractor's Company Name Telephone  
PO Box 608 Dunn, NC 28335 ttart@freedomconstructors.com  
Address Email Address  
11590  
License #

**Electrical Contractor Information**

Description of Work WIRE New House Service Size 200 Amps T-Pole  Yes  No  
Jason H Pope Electrical Contractors 919-820-0837  
Electrical Contractor's Company Name Telephone  
81 Beaver Creek Dr, Dunn NC 28334 jhp@electrical@hotmail.com  
Address Email Address  
27284-u  
License #

**Mechanical/HVAC Contractor Information**

Description of Work HVAC New House  
J+M Heating + Air Inc 910-897-5581  
Mechanical Contractor's Company Name Telephone  
724 Turlington Rd, Dunn, NC 28334 jandmhvac@centurylink.net  
Address Email Address  
17164  
License #

**Plumbing Contractor Information**

Description of Work Plumb new house # Baths \_\_\_\_\_  
Gilbert Plumbing Co 910-567-6361  
Plumbing Contractor's Company Name Telephone  
1638 Timothy Rd, Dunn, NC 28334 gpci@intrstar.net  
Address Email Address  
10929  
License #

**Insulation Contractor Information**

Insulating Inc 5902 Fayetteville Rd, Raleigh NC 919-772-9080  
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

T.OTH M TCT  
Signature of Owner/Contractor/Officer(s) of Corporation

5-8-18  
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 Freedom Constructors Inc

Sign w/Title T.OTH M TCT - Freedom Constructors Inc Date 5-8-18

DO NOT REMOVE!

**Details: Appointment of Lien Agent**

Entry #: 847759

Filed on: 05/08/2018

Initially filed by:  
freedomconstructors

**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**

641 Harvell Road  
Coats, NC 27521  
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**

Cullen Lee Matthews and Laurie Matthews  
620 Harvell Road  
Coats, NC 27521  
United States  
Email: [larrywade@freedomconstructors.com](mailto:larrywade@freedomconstructors.com)  
Phone: 910-892-1231

**Date of First Furnishing**

05/14/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384