Application #

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

18-56043379

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

0	1 1 -
Owners Name Precision Custom Humes and Rea	loughluns, LL( Date 7/5/17
Site Address ZIY Apache Trail	Phone 910-988-8172
Directions to job site from Lillington 77 W to 87 N La	n Milton welch Rd. Ran
Summerlin Dr. Right on Aparhe Trail	
Subdivision Summer lin	Lot 6
Description of Proposed Work New SFR Construction	# of Bedrooms 4
Heated SF 7179 Unheated SF 450 Finished Bonus Room? No Crawl Space Slab J MUNO	
General Contractor Information	
Building Contractor's Company Name	910-988-9172
ZS6 Briar Hill R1. Raeford NC	Shaun@precisionproperties nc. (OM)
Address	Email Address
77380	Email Address
License #	
Electrical Contractor Information	1 (
Description of Work New Const. Service Service Size  J. Melvin Electric  Electrical Contractor Information  The land the Const. Service Size	700Amps T-Pole Vyes No
J. Melvin Electric	310-284-4633
5960 Lakeway Dr. Fayetteville NC 28304	Telephone
Address	Email Address
79758-6	Littali Address
License #	
Mechanical/HVAC Contractor Information	
Description of Work New construction	
Perturmance Heating and Air	910-273-1836
Mechanical Contractor's Company Name	Telephone
5217 Hornbeam Rd. Foyetteville NC 78304	
Address (1) (1) (1)	Email Address
79759H73-)	
License # Plumbing Contractor Information	
Description of Work New contraction as per plans	
Television of work Account to the property of	# Baths
Plumbing Contractor's Company Name	Telephone
1989 Wilmington HWY Payetteville NC 78306	Геерпопе
Address	Email Address
37324 81	
License #	
Insulation Contractor Information	
A-1 Insulation Inc. Pu Box 180 Hupe Mills	
Insulation Contractor's Company Name & Address	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 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 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 Shown Cardner / Member Manager Date 19/19/14 Company or Name

Sign w/Title

# DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 916002

Filed on: 09/07/2018

Print & Post

Contractors:

project.

Please post this notice on the Job

**Suppliers and Subcontractors:** 

phone to view this filing. You can then file a Notice to Lien Agent for this

Scan this image with your smart

Initially filed by: shaungardner

#### **Designated Lien Agent**

Old Republic National 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**

Lot 6 Summerlin 214 Apache Trail Sanford, NC 27332 Harnett County

**Property Type** 

1-2 Family Dwelling

#### Owner Information

# **Date of First Furnishing**

Precision Custom Homes and Renovations LLC 256 Briar Hill Rd.

Raeford, NC 28376 **United States** 

Email: shaun@precisionpropertiesnc.com

Phone: 910-988-8172

09/19/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384