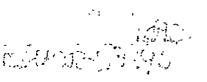
Harnett County Central Permitting
PO Box 65 Lillington NC 27546
910 893 7525 Fax 910 893 2793 www.harnett.org/permits

Application #

Each section below to be filled out by whomever performing work Must be owner or licensed contracto name & p

wner or licensed Address company	Application for Residential Building and T	rades Permit
hone must match		
Owner's Name	Precision Custom Homes and Re	Noughiuns, LLC Date 713117
Site Address	260 Apache Trail	Phone 910-988-8172
Directions to job site fr	rom Lillington 77 W to 87 N L	an Milton welch Rd. Ran
SUMMER	lia 125. Run Apache Trail	,
7014710	IM V	
Subdivision So	mmerlin	Lot 8
Description of Propose	ed Work New SFR Construction	# of Bedrooms 4
V	Inheated SFFinished Bonus Room? _	1 /4/1
Heated SF	General Contractor Informatio	n
SMG PRECI	sion Properties LLC	910-988-8173
Building Contractor's	Company Name	Talaskana
7 CL Rein	or Hill Rl. Raeford NC	shaun@precisionproperties (
Address	HIN ICE ROLLIE	Email Address
773 80		
License #	_	
	Electrical Contractor Information	on (
Description of Work _	New Const. Service Service Size	700Amps T-Pole Vyes No
J. Melvin		910-584-4255
		Telephone
5960 1	akeway Dr. Fayetteville NC 2830	14
Address		Email Address
79758-L		
License #	_	
	Mechanical/HVAC Contractor Information	mation .
Description of Work	New construction	
Postores as	Heating and Air	910-277-1836
Mechanical Contracto		Telephone
Mechanical Contracto	beam Rd. Faxetteville NC 78304	
7(1) (1011)	Peaw Ko. Laberren 115 can	Email Address
Address 79759 H73	2 1	
	· <u>-</u> /	
License #	Plumbing Contractor Informati	ion
	un a codicultion as non alan	# Baths
Description of Work	New contraction as per plans	910-303-5585
Islaity P	lumbing (o le	
Plumbing Contractor	s Company Name	Telephone
1989 Wilmir	s Company Name ny tun HWY Foyetteville N(7830	Frank Address
Address		Email Address
37324 1	1	
License #		tron
016	Insulation Contractor Informat	
A-1 Insu	211	,
Insulation Contractor	c Company Name & Address	Telephone

Insulation Contractor's Company Name & Address



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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 currept 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 Officer/Agent of the Contractor or Owner **General Contractor** 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 Precision Properties Company or Name Gardner / Member Manager Date_

Sign w/Title

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 929758

Filed on: 10/04/2018 Initially filed by: shaungardner

Designated Lien Agent

Old Republic National Title Insurance Company

Online: www.liensnc.com/propromotionsecom/

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 8 Summerlin 240 Apache Trail Sanford, NC 27332 Harnett County

Property Type

1-2 Family Dwelling

Print & Post



Contractors:

Please post this notice on the Job Site.

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

Shaun Gardner 256 Brlar Hill Rd. Raeford, NC 28376 United States

Email: shaun@precisionpropertiesnc.com

Phone: 910-988-8172

Date of First Fernishing

10/22/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 929758

Filed on: 10/04/2018
Initially filed by: shaungardner

Designated Lien Agent Project Property Old Republic National Title Insurance Lot 8 Summerlin Company 240 Apache Trail Sanford, NC 27332 Online: www.liensnc.com Harnett County Address: 19 W. Hargett St., Suite 507 / Raleigh, NC 27601 Phone: 888-690-7384 **Property Type** Fax: 913-489-5231 Email: support@liensnc.com 1-2 Family Dwelling

Date of First Furnishing

10/22/2018

Owner Information

Shaun Gardner 256 Briar Hill Rd. Raeford, NC 28376 United States

Email: shaun@precisionpropertiesnc.com Phone: 910-988-8172

View Comments (0)

Print & Post



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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.

Technical Support Hotline: (888) 690-7384