Same Same

Application # 14 50043382

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

wer performing work wher or licensed	,	4 %	e 2	_ %	4/13/18
Address company	Application for R	<u>esidential Build</u>	ing and	Trades Permit	
hone must match				Renovations LL(Das	Dispos
Owners Name	Lection Co.	rail (Lot	0	Phone9	0-988-8173
Site Address	284 Apache			on Milton welch	Rd. D. do
Directions to job site fr	om Lillington 75 \	n to 81	<u>N</u>	ON MITTER WEITT	<u> </u>
Summer	lis Dr.		1		
			3		
SubdivisionSu	mmerlin			Lot	<u> </u>
Description of Propose	ed Work New S	FIC CONSTRU	VC4107	# of Bedroom	ns
Heated SF 2/77 U	Inheated SF	Finished Bonus	s Room	//V Crawl Space	Slab/_
	Gene	rai Contractor	<u>Intorma</u>	910 - 988 - S	
SMG Preci	sion Properties		-		
Building Contractors	Company Name	Parford NC	-	(punous oreciz	lunproperties nc. (OM)
	TI. MIN ICA. A	cae 1075 75 V		Email Address	
Address 773 80			a Laboratoria		
1			The state of the s		
	Elect	rical Contractor	Inform	ation ize 700Amps T-Pole	J ves No
Description of Work	יול וביושו	Service Se	stáice 2	910 - 584.	7750
	Electric	······································	<u> </u>		(600
Electrical Contractor s	akeway Dr.	Sizetteville 1	vc 28	304	
Address	akeway on i	4/5		Email Address	
79758-6			İ		
License #					
		al/HVAC Contra	actor In	<u>formation</u>	
Description of Work _	New constitu		1	<u> </u>	1076
Perturmance	Heating and A	10		910-273-	13.0
Mechanical Contracto	or s Company Name	11 :11- No.	7 670	Telephone	
2511 Horu	beam RD. Roye	ארפטיוופ אינ	5 9 70	Email Address	
Address 79759 H73	i i			Elliali Addiess	
License #					
		bing Contracto	r Inform	<u>nation</u>	
Description of Work	nem coyliniti	in as per pla	יע	# Baths	
Trinity 1	Plumbing Co LL			910-303 -	5587
Plumbing Contractor	s Company Name	u · h		Telephone	
	nyton HWY R	yetteville N	<u>(7</u> 8	-300	
Address	o'i			Email Address	
37329 / License #					
	Insul	ation Contracto	r Infor	<u>nation</u>	•
A-1 Insu	lation Inc. P	0 BOX 180	Hupp	Mills NC	
Inculation Contractor	s Company Name &	Address	1	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 Ma 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 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 Proper +10) Company or Name Gardner / Member Manager Date 7/5/17 Shaun

Sign w/Title

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 833491

27601

Filed on: 04/12/2018

Initially filed by: shaungardner

Investors Title Insurance Company Online: www.liensnc.com @mp//www.liensnc.com/ Address: 19 W. Hargett St., Suite 507 / Raleigh, NC Project Property Summerlin Lot 9 284 Apache Trail Sanford, NC 27332 Harnett County

Property Type

1-2 Family Dwelling

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

Phone: 888-690-7384

Email: support@liensnc.com

Fax: 913-489-5231

Precision Custom Homes and Renovations, LLC 256 Briar Hill Rd.
Raeford, NC 28376
United States
Email: shaun@precisionpropertiesnc.com
Phone: 910-988-8172

Date of First Furnishing

04/18/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384