



Application # 43491

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 information on license.

**Application for Residential Building and Trades Permit**

Owner's Name: Steve Shankin Date: 10-8-18  
Site Address: Lot #11 Cedar ~~Forest~~ Trail Phone: 919-349-5323  
Subdivision: Rock Lot: 11  
Description of Proposed Work: New SFH and Detach Garage

**General Contractor Information**

Triangle sports Group, LLC 919-696-7446  
Building Contractor's Company Name Telephone  
214 Queensferry Rd Cary 27511 Vince@Silverdevelopers.com  
Address Email Address  
53032  
License #

**Electrical Contractor Information**

Description of Work New SFH Service Size: 400 Amps T-Pole:  Yes  No  
Raleigh Lanehart Electric 919-303-6266  
Electrical Contractor's Company Name Telephone  
1120 Burma Dr Apex 27539 Tigh@lanehart.com  
Address Email Address  
24986-U  
License #

**Mechanical/HVAC Contractor Information**

Description of Work New SFH - Install 2 Systems.  
Greenlight Cooling & Heating 919-500-0087  
Mechanical Contractor's Company Name Telephone  
12218 Bradford Green Sq. PMB 301 JPowell@GreenlightCooling.com  
Address Email Address  
H3 Class 1 Cary 27511  
License #

**Plumbing Contractor Information**

Description of Work New SFH # Baths 3 Full 2-1/2 BA  
J.C. Wilkins Plumbing 919-639-6201  
Plumbing Contractor's Company Name Telephone  
840 Massensill Pond Rd Plumbsmart@Centurylink.net  
Address Email Address  
10421  
License #

**Insulation Contractor Information**

MPI Foam - 1220 Nowell Rd 919-360-0888  
Insulation Contractor's Company Name & Address Telephone  
Raleigh 27607

**\*NOTE: General Contractor / owner must fill out and sign the second page of this application.**

1. Introduction

2. Methodology

3. Results and Discussion

4. Conclusion

5. References

6. Appendix

7. Bibliography

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9. Author's Note

10. Correspondence

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12. Declaration of Interest

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27. Discussion

28. Conclusion

29. References

30. Appendix

31. Bibliography

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

10-8-18  
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:

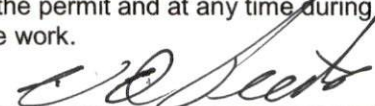
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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.

Sign w/Title:  Member Manager    Date: 10-8-18

**DO NOT RE**

# Details: Appointment of Lien Agent

Entry #: 928407

## Designated Lien Agent

Old Republic National Title Insurance  
Company

**Online:** [www.liensnc.com](http://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) (<mailto:support@liensnc.com>)

## Project Property

Rock  
Lot #11 Cedar ~~Creek~~ Trail  
Fuquay-Varina, NC 27526  
Harnett County

## Property Type

1-2 Family Dwelling

## Owner Information

Vincent DeFreitas  
214 Queensferry Rd.  
Cary, NC 27511  
United States  
Email: [Vince@Silverdevelopers.com](mailto:Vince@Silverdevelopers.com)  
Phone: 919-696-7446

## Date of First Furnishing

10/03/2018

View Comments (0)

**Technical Support Hotline**

# Payment Receipt Confirmation

Your payment was successfully processed

## Transaction Summary

Description	Amount
NC Liens	\$30
Total Amount Paid	\$30

## Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
RESAPPT	Appointment of Lien Agent (1-2 Family Dwelling) - Entry Number: 928407	\$30	1	\$30
			TOTAL	\$30

Customer Information		Payment Information	
Customer Name	Vincent DeFreitas	Payment Type	Credit Card
Local Reference ID	302586	Billing Name	Vincent DeFreitas
Receipt Date	10/3/2018	Credit Card Number	*****1726
Receipt Time	09:59:33 AM EDT	Order ID	30253892
		Credit Card Type	VISA
Billing Information			
Billing Address 1	214 Queensferry Rd.	Phone Number	9196611292
Billing Address 2		Fax Number	
Billing City, State	Cary, NC		
Zip/Postal Code	27511		
Country	US		