Application #

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

18-500-43710

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

Owners Name <u>Signature Home Builders</u>	Date 4/19/13
Site Address _ (ol Pintail Dr.	Phone 910-892-9200
Directions to job site from Lillington	
Subdivision Thomas Manor	Lot 34
Description of Proposed Work New Const.	
Heated SF 1612 Unheated SF 681 Finished Bonus Room? General Contractor Information	Yes Crawl Space Slab
Signature Home Builders	910-892-9299
Building Contractor's Company Name	Telephone
Address N. Main St. Lillington NC 27546	<u>csherred.shb@gmail.iom</u> Email Address
4943   License #	
Electrical Contractor Information	on /
Description of Work Slectrical Service Size	_
Electrical Contractor's Company Name	<u>9/0-723-/937</u> Telephone
948 Pan Dr. Hope Mills NC 28348	
Address	Email Address
3/424- License #	
Mechanical/HVAC Contractor Infor	mation
Description of Work HVAC	
Mechanical Contractor's Company Name	910-892-8827
Mechanical Contractor's Company Name	Telephone
1001 Donin Dr. Frain NC 28339	
Address	Email Address
License #	
Plumbing Contractor Informati	on
Description of WorkPlimbing	# Baths
	910-820-0026
Plumbing Contractor's Company Name	Telephone
P.O. Box 764 Benson NI 27504	
Address	Email Address
7950	
License # Insulation Contractor Information	ion
Cumbertand Insulation	910-484-7118
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	
Company or Name Churs Sherod Signature It me Buildes	
Sign w/Title Christyn B. Sem Date 4/19/18	

## DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 836968

Filed on: 04/19/2018

Initially filed by: larrydaughtry02152

## Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com (lette "wood liensus com)

Address: 19 W. Hargett St., Suite 507 / Raleigh, NC

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (moilto supportiréficesus com)

## **Project Property**

Lot 34 Thomas Manor 61 Pintail Dr. Lillington, NC 27546

Harnett County

## Property Type

1-2 Family Dwelling

## Date of First Furnishing

04/23/2018

## Owner Information

SIgnature Home Builders 1209 N. Main St. Lillington, NC 27546 United States

Email: csherrod.shb@gmail.com

Phone: 910-892-9299

Print & Post

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.

View Comments (0)

Technical Support Hotline: (888) 690-7384