

09/09/11

Application #
18-543776

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.

Application for Residential Building and Trades Permit

6/14/18

Owner's Name Precision Custom Homes and Renovations, LLC Date ~~6/14/18~~
Site Address 63 Beautiful Lane Phone 910-988-8172
Directions to job site from Lillington 27W to 87 N, Lan Milton Welch Rd., Ran Summerlin Dr.

Subdivision Summerlin Lot 30
Description of Proposed Work New SFR Construction # of Bedrooms 4
Heated SF 2218 Unheated SF 458 Finished Bonus Room? No Crawl Space Slab

General Contractor Information

Building Contractor's Company Name SMG Precision Properties LLC Telephone 910-988-8172
256 Briar Hill Rd. Raeford NC Email Address shaun@precisionpropertiesnc.com
Address 72380
License # _____

Electrical Contractor Information

Description of Work New Const. Service Service Size 200 Amps T-Pole Yes No
J. Melvin Electric Telephone 910-584-4255
Electrical Contractor's Company Name _____
5960 Lakeway Dr. Fayetteville NC 28304 Email Address _____
Address 29258-L
License # _____

Mechanical/HVAC Contractor Information

Description of Work New construction
Performance Heating and Air Telephone 910-273-1836
Mechanical Contractor's Company Name _____
5217 Hornbeam Rd. Fayetteville NC 28304 Email Address _____
Address 29759 H23-1
License # _____

Plumbing Contractor Information

Description of Work New construction as per plans # Baths _____
Trinity Plumbing Co LLC Telephone 910-303-5585
Plumbing Contractor's Company Name _____
1989 Wilmington Hwy Fayetteville NC 28306 Email Address _____
Address 32324 P1
License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address A-1 Insulation Inc. PO Box 180 Hope Mills NC 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

Shawn D

~~6/14/11~~ 6/14/11

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 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

Company or Name SMG Precision Properties

Sign w/Title Shawn D Shawn Gardner / Member Manager Date ~~6/14/11~~ 6/14/11

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 866823

Filed on: 06/11/2018

Initially filed by: shaungardner

Designated Lien Agent

Investors Title Insurance Company

Online: 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>)

Project Property

Lot 30 Summerlin
63 Beautiful Lane
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

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

06/20/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384