Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address company name & phone must match. Harnett County Central Permitting PO Box 65 Lilington NC 27546 910 893 7525 Fax 910 893 2793 www.harnett.org/parmits

## Application for Residential Building and Trades Permit

Owners Name Bryant Lockamy	Date 5-14-18
Srie Address	Dete <u>5-14-</u>  8 Phone <u>919-524-3</u> 354
Directions to job site from Lillington	
-	
Subdivision	Lot
Description of Proposed Work	# af Bedrooms
Heated SF Unheated SF Finished Bonus Room?	Crewl Space Slab
General Contractor Informatio	
Building Contractor & Company Name	919-639-4672 Telephone
Robox 2135 Arajer, nc 27501	Southern truckhomes IIC @ gmais.
Address	Email Address Con
78270	
License # Electrical Contractor Informativ	on /
Description of Work Service Size	On Amps T-Pole Ves No
SNO fledic	419-427-6952
Electrical Contractor & Company Name	Telephone
19655 De Muy 210 Angler, DC 27501	Ernet Address
13075	Filipi Landa daa
License #	
Mechanical/HVAC Contractor Information	
Description of Work	010 020 0330
Machanical Contractor's Company Name	919-934-9339 Telephone
412 Lazy Bronch Drive benson NC 27504	maistreammethoicee@gna1.
Address	Email Address
31005	
License # Plumbing Contractor Informati	00
Description of Work	# Baths
Double J Plumbing	910-814-7705
Plumbing Contractor's Company Name	Telephone
614 Burd Road Broken oc 28323	jamicjohn son plumbing @ gmail. com
Address	Email Address
21649 License #	
insulation Contractor informat	ion Con the Back
Tri City In Aulaham	910.486-8855
insulation Contractor's Company Name & Address	Telephone 2.2
1-04 MM///C NC 80300 5	
*NOTE General Contractor must fill out and sign the sec	soun baga ot tum abbiganou

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 Hamett County Zoring 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 are 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 Hamett County Central Permitting Department of any and all changes.  EXPIRED PERMIT FEES - 8 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.	
Signature 2017 Contractor/Office (s) of Corporation  5-14-18  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	
White 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 end at any time during the permitted work from any person firm or corporation carrying out the work	
Company or Name Southern Touch Morres, LC	
Sign w/Title Byent Lockary (Owner) Date 5-14-18	

## LIEN AGENT INFORMATION

Effective April 1, 2013

In accordance with North Carolina General Assembly Session Law 2012-158, Inspection Departments are not allowed to issue any permit where the project cost is \$30,000 or more unless the application is for improvements to an existing dwelling that the applicant uses as a residence OR the property owner has designated a lien agent and provided the inspections office with the information below:

Name of Lien Agent	Investors Title Insurance Company
Mailing address of Agent	19 W. Margett St. Suite 50
	Raligh, NC 27601
Physical address of Agent	19 W. Margett St. Swite 507
	Baleigh, NC 27601
Telephone 888-1090	-7384 Fax 913-489-5231
Email Support @	Liensoc, com

The information will be attached to the permit record and a copy provided to the applicant. The applicant is required to post a copy on the construction site.

Excerpt from North Carolina G.S. 160A-417:

"(Effective April 1, 2013) No permit shall be issued pursuant to subdivision (1) of subsection (a) of this section where the cost of the work is thirty thousand dollars (\$30,000) or more, other than for improvements to an existing single-family residential dwelling unit as defined in G.S. 87-15.5(7) that the applicant uses as a residence, unless the name, physical and mailing address, telephone number, facsimile number, and electronic mail address of the lien agent designated by the owner pursuant to G.S. 44A-11.1(a) is conspicuously set forth in the permit or in an attachment thereto. The building permit may contain the lien agent's electronic mail address. The lien agent information for each permit issued pursuant to this subsection shall be maintained by the inspection department in the same manner and in the same location in which it maintains its record of building permits issued."

### DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 850224

Filed on: 05/10/2018 Initially filed by: southerntouchhomeslic

#### Designated Lien Agent

Project Property

Print & Post

Investors Title Insurance Company

Online: www.liensnc.com (hap www.liensnc.com) Harne

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

27601

Phone: 888-690-7384
Fax: 913-489-5231

Email: support/aliensne.com/ponto/nepong/some com/

Sheriff Johnson Road Angier, NC 27501 Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

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

Bryant Lockamy PO Box 2135 Angier, NC 27501 United States

Email: southerntouchhomeslle@gmail.com

Phone: 919-639-4672

05/25/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384