

09/09/11

Application #

1850044161

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**

Owner's Name Ivercon Inc. Date \_\_\_\_\_  
Site Address 40 Harvest Court, Linden NC Phone 910.717-5076  
Directions to job site from Lillington \_\_\_\_\_

Subdivision Sweetwater Lot 45  
Description of Proposed Work \_\_\_\_\_ # of Bedrooms 4  
Heated SF 2100 Unheated SF 421 Finished Bonus Room? NO Crawl Space X Slab \_\_\_\_\_

**General Contractor Information**

Ivercon, Inc. 910-237-3461  
Building Contractor's Company Name Telephone  
PO Box 67770 troy@ivercon.net  
Address Email Address  
57917/LTD  
License #

**Electrical Contractor Information**

Description of Work NEW CONSTRUCTION Service Size 200 Amps T-Pole  Yes  No  
SANDY RIDGE ELECTRIC 910-323-2458  
Electrical Contractor's Company Name Telephone  
1ST WHITEHEAD RD. FAYETTEVILLE NC diane@sandyridgeelectric.com  
Address 28312 Email Address  
NC 279701  
License #

**Mechanical/HVAC Contractor Information**

Description of Work NEW CONSTRUCTION  
CERTIFIED HEATING & AIR  
Mechanical Contractor's Company Name Telephone 910-858-0000  
PO Box 1071 Hope Mills, NC ETHRIN.certified@gmail.com  
Address 28348 Email Address  
H3C1/20012  
License #

**Plumbing Contractor Information**

Description of Work NEW CONSTRUCTION # Baths 2 1/2  
LARRY LEE PLUMBING 910-424-1766  
Plumbing Contractor's Company Name Telephone  
7051 CREST ST. FAYETTEVILLE NC 28306 lleepinc@aol.com  
Address Email Address  
05277 PL  
License #

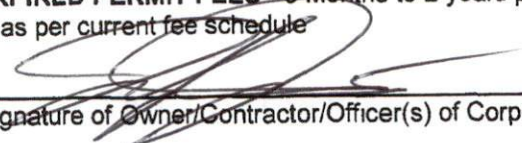
**Insulation Contractor Information**

ATWZ INSULATION 919-661-0999  
Insulation Contractor's Company Name & Address Telephone  
GARLAND NC 27529

\*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

  
Signature of Owner/Contractor/Officer(s) of Corporation

10 May 2019  
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 Universal, Inc.

Sign w/Title President Date 10 May 2019

~~GAS CONTRACTOR  
FOR GAS LOG FIRE PLACE  
DIVERSIFIED ENERGY  
17220 US Hwy 421 S. Durant, NC 28334-8257  
Lic. # 31611 FP~~

DO NOT REMOVE!

## Details: Appointment of Lien Agent

Entry #: 1038502

Filed on: 05/06/2019

Initially filed by: troy@ivercon.net

### Designated Lien Agent

Investors 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

Lot 45 Sweetwater Subdivision  
40 Harvest Court  
Linden, NC 28356  
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

Troy Iverson  
PO Box 64778  
Fayetteville, NC 28306  
United States  
Email: [tj@ivercon.net](mailto:tj@ivercon.net)  
Phone: 910-717-5076

### Date of First Furnishing

05/13/2019

View Comments (0)

Technical Support Hotline: (888) 690-7384