



Application # 18-50044902

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: Lindsay Putman Date: 7/25/18

Site Address: 233 Hilliard Rd Phone: 919 868 5088

Subdivision: _____ Lot: _____

Description of Proposed Work: New SFD

General Contractor Information

Linwood Chad Shingleton 919 868 5088

Building Contractor's Company Name Telephone

PO Box 1588 Carolina Beach NC 28428 tooconinc@gmail.com

Address Email Address

78454

License # _____

Electrical Contractor Information

Description of Work Wire New SFD Service Size: 200 Amps T-Pole: Yes No

C and M Electric 919 7724518

Electrical Contractor's Company Name Telephone

8305 Cleveland Rd Clayton NC pat@candmelectric.com

Address Email Address

05689

License # _____

Mechanical/HVAC Contractor Information

Description of Work 14 SEER Heat Pump

Stephenson Heating and Air

Mechanical Contractor's Company Name Telephone

343 Shipwash Dr Garner NC

Address Email Address

18644

License # _____

Plumbing Contractor Information

Description of Work _____ # Baths 4.5

C and C Select Plumbing/ Carl Bjorling 919 625 0163

Plumbing Contractor's Company Name Telephone

421 Watkins Rd Clayton NC

Address Email Address

25464

License # _____

Insulation Contractor Information

Tatum Insulation 919 661 0999

Insulation Contractor's Company Name & Address Telephone

***NOTE: General Contractor / owner 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

7/25/2018

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:



Date: 7/25/18

DO NOT REMOVE!

Details: Appointment of Lien Agent
Entry #: 894384

Filed on: 07/31/2018
Initially filed by: tideoneon

Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com 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 support@liensnc.com

Project Property

233 Hilliard Rd
Fuquay Varina, NC 27526
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

Chad Shingleton
PO Box 1588
Carolina Beach, NC 28428
United States
Email: toocominc@gmail.com
Phone: 919-868-5088

Date of First Furnishing

09/01/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384