

Application # \_\_\_\_\_

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** 

on on license.	,
Owner's Name: Signature Home Builders, INC	Date: 7/21/18
Owner's Name: Signature Home Builders, INC Site Address: 80 Pintail Dr. Lillington NC	17546 Phone: 910-892-929
Subdivision: Thomas Nanor	Lot:
Description of Proposed Work:	
General Contractor Information	
Signature Home Builders	910-892-9299
Building Contractor's Company Name	Telephone .skb
1209 N. Main St Lillington NC 2754	'E csherrodognail. 100
Address	Email Address
<u>49431</u> License #	
License #	_
Description of Work Flectrical Contractor Information  Service Size:	Amps T-Pole: Tyes TNo
Puberd Cleaning	910-723-1937
Buford Electric  Electrical Contractor's Company Name	Telephone
948 Pan Dr. Hope Mills NC 28348	Сориси
Address	Email Address
31424	
License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work	
Custan Iteating + Air Mechanical Contractor's Company Name	9117-1892-8827
Mechanical Contractor's Company Name	Telephone
1001 Denim Dr. Garia Mc 28339	
Address	Email Address
12195	
License #	
Plumbing Contractor Information	
Description of Work Plumbing  L.R. Clover Humbing	_# Baths
Plumbing Contractor's Company Name	910-820-0026
rambing contractors company rame	Telephone
P.O. Box 764 Benson NC 27504	Frank Address
Address	Email Address
1958 License #	
Insulation Contractor Information	on
Cumperland Insulation	910-484-7/18
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 <a href="by signing below I have obtained all subcontractors">by signing below I have obtained all subcontractors</a> <a href="permission to obtain these permits">permission to obtain these permits</a> and if <a href="any changes">any changes occur including listed contractors</a>, 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

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: Chris Shernod Project Manager Date: 1/21/18	

### DO NOT REMOVE!

# **Details: Appointment of Lien Agent**

Entry #: 889084

Filed on: 07/21/2018

Initially filed by: larrydaughtry02152

## Designated Lien Agent

Investors Title Insurance Company

Online: www.liensnc.com

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

27601

Phone: 888-690-7384

Fax: 913-489-5231

# Property Type

**Project Property** 

Lot 32 Thomas Manor 80 Pintail Dr.

Lillington, NC 27546

Harnett County

### Date of First Furnishing

07/23/2018

1-2 Family Dwelling

# 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



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.

View Comments (0)

Technical Support Hotline: (888) 690-7384