

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: MARTY + ALLI BIRD Phone: 910-893-3896

Owner (s) Mailing Address: 2930 US 401S
LILLINGTON NC 27546

Land Owner Name (s): MARTY + ALLI BIRD Phone: 910-893-3896

Construction or Site Address: 2930 US- 401S LILLINGTON NC

PIN # 0558-96-0007 Parcel # _____

Job Cost: \$2700.00 Description of Work to be done WIRE FOR LIGHTS @ FARM SHELTER

Mechanical: New Unit With Ductwork ___ New Unit Without Ductwork ___ Gas Piping ___ Other ___

Electrical*: 200 Amp <200 Amp ___ Service Change ___ Service Reconnect ___ Other ___
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap ___ Number of Baths ___ Water Heater ___

Specific Directions to Job from Lillington:
2 MILES SOUTH OF LILLINGTON ON US 401
ON RIGHT 1/2 MILE SOUTH OF PINE BLUFF GOLF COURSE

Subdivision: U1A Lot #: U1A

I PATRICK ELECTRIC will provide the TOMMY PATRICK labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is _____, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Patrick Electric
Contractor's Company Name Telephone _____
1309 N. Main St.
Address Email Address _____
06183
License # _____

Structure Owner / Contractor Signature: Marty Bird Date: 6-4-20

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**

Print this page



Property Description:

1.67 ACS JEANETTE S
BYRD

Harnett County. GIS

PID: 100558 0276

PIN: 0558-96-0007.000

REID: 0039345

Subdivision:

Taxable Acreage: 1.670 AC ac

Caclulated Acreage: 1.78 ac

Account Number: 1002219000

Owners: BYRD MARTY VANN & BYRD ANN L

Owner Address : 2930 US 401 SOUTH LILLINGTON, NC 27546-0000

Property Address: US 401 S NC

City, State, Zip: , NC,

Building Count: 0

Township Code: 10

Fire Tax District: Flatwoods

Parcel Building Value: \$0

Parcel Outbuilding Value : \$12000

Parcel Land Value : \$5850

Parcel Special Land Value : \$0

Total Value : \$17850

Parcel Deferred Value : \$0

Total Assessed Value : \$17850

Neighborhood: 01000

Actual Year Built:

TotalAcutalAreaHeated: Sq/Ft

Sale Month and Year: 4 / 2000

Sale Price: \$9500

Deed Book & Page: 1411-0843

Deed Date: 2000/04/13

Plat Book & Page: -

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Y

Transfer or Split:

Within 1mi of Agriculture District: Yes

Prior Building Value: \$0

Prior Outbuilding Value : \$0

Prior Land Value : \$5340

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$5340

Generating Map...

SCHEDULE F (Form 1040)

Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Farming

Attach to Form 1040, Form 1040NR, Form 1041, or Form 1065.

Go to www.irs.gov/ScheduleF for instructions and the latest information.

2018

Attachment Sequence No. 14

Name of proprietor MARTY BYRD

Social security number (SSN) 240-02-5897

A Principal crop or activity CORN AND PUMPKIN

B Enter code from Part IV 111210

C Accounting method: [X] Cash [] Accrual

D Employer ID no. (EIN), (see instr)

- E Did you "materially participate" in the operation of this business during 2018? If "No," see instructions for limit on passive losses Yes [] No [X]
F Did you make any payments in 2018 that would require you to file Form(s) 1099 (see instructions)? Yes [] No [X]
G If "Yes," did you or will you file required Forms 1099? Yes [] No [X]

Part I Farm Income -- Cash Method. Complete Parts I and II (Accrual method. Complete Parts II and III, and Part I, line 9.)

Table with 9 rows and 3 columns. Row 1: 1a Sales of livestock... 1b Cost... 1c Subtract... Row 2: 2 Sales of livestock, produce, grains... 1,345. Row 3: 3a Cooperative distributions... 3b Taxable amount. Row 4: 4a Agricultural program payments... 4b Taxable amount. Row 5: 5a Commodity Credit Corporation (CCC) loans... 5c Taxable amount. Row 6: 6 Crop insurance proceeds... 6b Taxable amount. Row 7: 7 Custom hire (machine work) income. Row 8: 8 Other income... Row 9: 9 Gross income... 1,345.

Part II Farm Expenses -- Cash and Accrual Method. Do not include personal or living expenses. See instructions.

Table with 34 rows and 3 columns. Row 10: 10 Car and truck expenses... 10. Row 11: 11 Chemicals... 11. Row 12: 12 Conservation expenses... 12. Row 13: 13 Custom hire (machine work)... 13. Row 14: 14 Depreciation and section 179 expense... 1,691. Row 15: 15 Employee benefit programs... 15. Row 16: 16 Feed... 16. Row 17: 17 Fertilizers and lime... 429. Row 18: 18 Freight and trucking... 18. Row 19: 19 Gasoline, fuel, and oil... 212. Row 20: 20 Insurance (other than health)... 20. Row 21: 21 Interest (see instructions) 21a Mortgage... 21b Other... 275. Row 22: 22 Labor hired... 22. Row 23: 23 Pension and profit-sharing plans... 23. Row 24: 24 Rent or lease... 24a Vehicles... 24b Other... Row 25: 25 Repairs and maintenance... 147. Row 26: 26 Seeds and plants... 26. Row 27: 27 Storage and warehousing... 27. Row 28: 28 Supplies... 28. Row 29: 29 Taxes... 285. Row 30: 30 Utilities... 30. Row 31: 31 Veterinary, breeding, and medicine... 31. Row 32: 32 Other expenses (specify) 32a... 32b... 32c... 32d... 32e... 32f... Row 33: 33 Total expenses... 3,039. Row 34: 34 Net farm profit or (loss)... -1,694.

- 35 Reserved for future use.
36 Check the box that describes your investment in this activity and see instructions for where to report your loss.
a [X] All investment is at risk. b [] Some investment is not at risk.

For Paperwork Reduction Act Notice, see the separate instructions.

Schedule F (Form 1040) 2018

Jennifer Brock

From: Marty Byrd <Marty.Byrd@stwcorp.com>
Sent: Tuesday, June 2, 2020 10:00 AM
To: Jennifer Brock
Cc: Ann Byrd
Subject: [External]Premise# 82093771

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

For Application 17-50042596

Sent from my iPhone

Marty Byrd
General Superintendent
Utilities

S. T. Wooten Corporation

3801 Black Creek Road
Wilson, NC 27893
mobile 252.230.8130
office 252.291.5165
fax

www.stwcorp.com

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