Application #SFD | 807-0037

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: Kon Bare Foot	Date: <u>05 1</u> 2018	
Site Address: 5159 NC 27 & Coats NC	2752 Phone:	
Directions to job site from Lillington: 44 + 210 + 10	sugges to they	
55 type LETF ON My 27	<u> </u>	
	· 	
Subdivision: HOB BENEZY STEPHENSON	Lot:4	
Description of Proposed Work: 919 634 2009	# of Bedrooms: <u>3</u>	
Heated SF: 1840 Unheated SF: 87(p Finished Bonus Room? N	Crawl Space: Slab: 🏒	
NEMPMAH Builing gomp UC DBA Salt Blight Building Contractor's Company Name Design Build	919 817 7108 Telephone	
Address Pleasant RD	NICK@CAREYROOF. Com Email Address	
License #  Electrical Contractor Informatio	n .	
Description of Work Suctrucal Service Size:	Zoo Amps T-Pole: Yes X No	
K.A. Jackson	9/9 730  251 Telephone	
Electrical Contractor's Company Name  926   Raleian RD Benson	1 elephone	
9261 Raleign RD BENSON Address 21144-SP-SFD 27504	Email Address	
License #		
Mechanical/HVAC Contractor Information		
Description of Work	010 (18) (18)	
Moyne Sevant Mac Mechanical Contractor's Company Name	919 (B) 5   5 2 Telephone	
708 BIRCH hallow CT'	Email Address gmail. cm	
Address Fuguary 27529	Email Address	
33241	Jeroch I. Con	
License #  Plumbing Contractor Information	n	
Description of Work Plumbing Contractor information	#Baths 3	
Ambit Plumbing INC	919 984 1379	
Plumbing Contractor's Company Name	Telephone	
735 Rock Pillar RD	Contactambit @	
Address Clayron 27520 20823	Email Address	
License #		
Insulation Contractor Information		
Stephens Building PRODUCTS	919 (30 K365	
PZATONIA LANTISTO E L'AMBAN VIGANNO LA POTARTIDA L'ANDICHE PARTICIONE L'ANDICHE	relenanne .	

\*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.

LIEN 302211

Affidavit for Worker's Compensation N.C.G.S. 87-14		
The undersigned applicant being the:	· , i .	
General Contractor Owner Officer/Agent of the Contractor or C	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 insultinem.	rance to cover	
Has one (1) or more subcontractors(s) who has their own policy of workers' compensations themselves.	ation insurance	
Has no more than two (2) employees and no subcontractors.	1,	
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: Neverman Brilding Group LLC	<del></del>	
Sign w/Title: Dwner Date 19	01/18	

### DO NOT REMOVE!

# **Details: Appointment of Lien Agent**

Entry #: 927254

Filed on: 10/01/2018 Initially filed by: Caregroof

### Designated Lien Agent

Chicago Title Company, LLC

Online: www.liensnc.com programmemor.com

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

Raleigh, NC 27601 Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com (matter support@lensnc.com

### **Project Property**

Barefoot project 5159 NC 27 E Coats , NC Garnett 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

Nicholas Carey 2515 Mount pleasant rd Willow spring, NC 27592 United States Email: Nick@careyroof.com Phone: 919-817-3108 Date of First Furnishing

10/01/2018

View Comments (0)

Technical Support Hotline: (888) 690-7384