# 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** 

Contract Marketin	- 1 (
Owner's Name: Quren Jernigon	Date: 1/ 1/ 5
Site Address: TBD Maple Rd Angily WC 2	<u> 1950)</u> Phone: <u>910-203-490</u>
Directions to job site from Lillington: Hwy 4215 4	s thry 210 then
they 210 to they 55 time Right,	on 18 1my 55
DOSS Old Strave led next may no 1	he left is made Rd
Subdivision:	Lot:
Description of Proposed Work: Single Fom', ly Home	# of Bedrooms:
Heated SF: 15210 Unheated SF: 330 Finished Bonus Room?	Crawl Space: X Slab:
General Contractor Information	
Lauren Jernigan	410-2103-4910
Building Contractor's Company Name	Telephone
22 Hickory tree In Angier NC 27501 Address	Email Address
7.001033	Lindi Address
License #	,
Electrical Contractor Information	
Description of Work Indallator + wiring Service Size:	Amps T-Pole: Ves No
Old South Mechanical	919-800-7918
Electrical Contractor's Company Name	Telephone
1929 NC 42 Hwy Willow Springs Address	Email Address
30624 ·	Email Address
License #	
Mechanical/HVAC Contractor Inform	
Description of Work Install of heating + Air Syste	m d ductwork
Cold South Mechanical	919-800-7918
Mechanical Contractor's Company Name	Telephone
1929 NC 42 Hwy Willow Springs,	·
Address N C	Email Address
31333	
License #  Plumbing Contractor Information	n
Description of Work Domestic Water + drainage for new	_
1) 1	
Henderson's Ylumbing Inc Plumbing Contractor's Company Name	Telephone
120 Juniper Dr Clayton NC	- Coopijone
Address	Email Address
24861	
License #	
Insulation Contractor Informatio	$\frac{n}{2}$
1 WTUN -1-11 Delation	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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> and if <u>any</u> 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.

1 / leder

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.				
Company or Name: Court Jermon				
Sign w/Title: Your Date: 1110118.				

#### STATE OF NORTH CAROLINA

## OWNER EXEMPTION AFFIDAVIT PURSUANT TO G.S. 87-14(a)(1)

COUNTY OF	Harnett	:	•
Harnett	Inspections Department		
Address and	Parcel Identification of Real Property Where Br	uilding is to be Constructed	d or Altered:
.La	iven Ternigon Stricklon	<u>ط</u>	
	$\mathcal{J}$ (Print Full n an exemption from licensure under G.S. 87-1(l g paragraphs 2-4 below and attesting to the follow	b)(2) by initialing the relev	ant provision in paragraph 1
1.		pperty set forth above on v	which this building is to be
	OR		
	I am legally authorized to act on behalf altering this building on the property owned b firm or corporation:		
2,	the building and that duty will not be delegate Article 1 of Chapter 87 of the General Statutes	d to any person not duly li	
3,	Code, unless the plans for the construction or architect licensed pursuant to Chapter 83A of	alteration of the building v	vere drawn and sealed by an
4.	Licensing Board for General Contractors for ve exemption under G.S. 87-1(b)(2) for the building understand that, if the North Carolina Licensing not entitled to claim this exemption, the building alteration specified herein shall be revoked put	rification that I am validly on a construction or alteration or alteration of a contral contra	entitled to claim an on specified herein. I further actors determines that I was uilding construction or G.S. 160A-422.
	(Signature of Affiant)		Date
this ( Sign	The 20 day of November 20 8  All Walls Petrick  The Name of Notary Public		My County Halling CAROLINALING CAROLINALING
My	Commission Expires: $5/31/22$	(Notary Stamp or Seal)	CAROLINAMINI

(NOTE: It is a Class F felony to willfully commit perjury in any affidavit taken pursuant to law—G.S. 14-209)

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#### DO NOT REMOVE!

#### **Details: Appointment of Lien Agent**

Entry #: 930481

Filed on: 10/07/2018

Initially filed by: Ljernigan11

#### Designated Lien Agent

Fidelity National Title Company, LLC

Online: www.liensnc.com proproverbensnc.com

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

Raleigh, NC 27601

Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com (mails support@fensnc.com

#### **Project Property**

Maple rd Angler, NC 27501 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

Lauren Jernigan 22 hickory tree lane Angier, NC 27501 United States

Email: Ljernigan11@yahoo.com

Phone: 910-263-4960

View Comments (0)

Technical Support Hotline: (888) 690-7384

### **Payment Receipt Confirmation**

Your payment was successfully processed.

NO

**Transaction Summary** 

	Description	
Liens NC		
Total Amount Paid		

**Customer Information** 

Customer Name Lauren Jernigan

**Company Name** 

Local Reference ID 303248 Receipt Date 10/7/2018

Receipt Time 09:31:12 PM EDT

**Payment Information** 

Payment Type Credit Card
Credit Card Type VISA
Credit Card Number \*\*\*\*\*\*4737
Order ID 30317384
Billing Name Lauren jernigan

**Billing Information** 

Billing Address 22 hickory tree lane

Billing City, State Angier, NC ZIP/Postal Code 27501 US

**Phone Number** 9102634960

Fax Number

This receipt has been emailed to the address below. Email Address Ljernigan 11@yahoo.com