

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: Michael Hemby Date: 3/21/19  
Site Address: 2251 Pearisde Road Phone: 919-592-2643  
Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_  
Description of Proposed Work: New Construction

**General Contractor Information**

Michael Hemby 919-592-2643  
Building Contractor's Company Name Telephone  
1112 Arden Trace Ct, Fuquay Varina NC 27526 mhemb75@gmail.com  
Address Email Address

License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work all phases Service Size: 200 Amps T-Pole:  Yes  No  
Mabry's Electrical Service Inc 919-639-4837  
Electrical Contractor's Company Name Telephone  
731 Mabry Rd, Angier NC 27501 embar@mabryelectrical.com  
Address Email Address

License # 15077

**Mechanical/HVAC Contractor Information**

Description of Work Duct, air handler  
Michael Hemby 919-592-2643  
Mechanical Contractor's Company Name Telephone  
1112 Arden Trace Ct, Fuquay Varina NC 27526 \_\_\_\_\_  
Address Email Address

License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work water, drainage, septic # Baths 3  
Evans Plumbing 919-772-9133  
Plumbing Contractor's Company Name Telephone  
102 Sigma Dr, Garner, NC 27529 Service@evansplumbing.net  
Address Email Address

License # 7035


**Insulation Contractor Information**

GreenLife Solutions NC, Fuquay Varina 27526 919-290-7090  
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

3/21/19  
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:

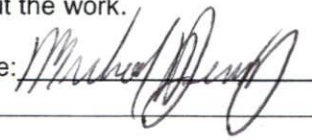
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.

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:  owner

Date: 3/21/19

## Details: Notice to Lien Agent

Entry #: 337161 | Linked to: #337160

Filed on: 08/11/2015

Initially filed by: DRHORTON

Status:

**Active -**

*Expires on 08/11/2020*

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### Parent Filings Information

Linked to Appointment of Lien Agent with ID: 337160

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### Potential Lien Claimant Information

**Control Point, Inc**  
6130 Harris Technology Blvd  
Charlotte, NC 28269 United States

*Phone:*  
Email: whuneycutt@controlpointinc.com

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### Contracted Through

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### Project Property

Gardens of Eastfield Lot 21  
6503 Eastfield Park Drive  
Charlotte, NC 28215  
*Mecklenburg County*

#### Attention:

I hereby give notice of my right subsequently to pursue a claim of lien for improvements to the real property described in this notice.

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**Technical Support Hotline: (888) 690-7384**