

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 981399

Filed on: 01/23/2019

Initially filed by:

watermarkhomes1308

Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com (<http://www.liensnc.com>)

Address: 19 W. Hargett St., Suite 507 /
Raleigh, NC 27601

Phone: 888-690-7384

Fax: 913-489-5231

Email: support@liensnc.com (<mailto:support@liensnc.com>)

Project Property

Lot 41 South Creek
81 Bayview Drive
Lillington, NC 27546
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

Watermark Homes, Inc
1308 Ft Bragg Road, Suite 201
Fayetteville, NC 28305
United States
Email: megan@watermarkhomesnc.com
Phone: 910-483-2229

Date of First Furnishing

01/25/2019

View Comments (0)

Technical Support Hotline: (888) 690-7384



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

Owner's Name: Ashton Creek Properties, LLC. Date: 1-15-19
Site Address: 81 Bayview Road Phone: 910-237-1512
Subdivision: South Creek Lot: 41
Description of Proposed Work: Single Family

General Contractor Information

Watermark Homes, Inc. 910-237-1512
Building Contractor's Company Name Telephone
1308 Ft Bragg Road, Suite 201 Fayetteville, NC 28305 christa@watermarkhomesnc.com
Address Email Address
49261BLD-U
License #

Electrical Contractor Information

Description of Work Electrical Service Service Size: 200 Amps T-Pole: Yes No
Tool Time Services Inc. 910-316-9063
Electrical Contractor's Company Name Telephone
PO Box 2207, Garner NC 27629 tooltimeservice@gmail.com
Address Email Address
18644 27554
License #

Mechanical/HVAC Contractor Information

Description of Work HVAC Heating and Air System
Stephenson Heating and Air, Inc. 919-329-0686
Mechanical Contractor's Company Name Telephone
343 Shipwash Drive, Garner NC 27520 Stephensonhvac@aol.com
Address Email Address
28541
License #

Plumbing Contractor Information

Description of Work Plumbing # Baths 3.5
Vance Johnston Plumbing Co, Inc. 910-424-6712
Plumbing Contractor's Company Name Telephone
3242 Mid Pine Road, Fayetteville NC 28306 lgoudy@vjplumbing.com
Address Email Address
L07756
License #

Insulation Contractor Information

Cumberland Insulation- 4205 Clington Rd. Fayetteville NC, 2831 910-484-7118
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

01-23-2019
Date

Affidavit for Worker's Compensation N.C.G.S. 87-14

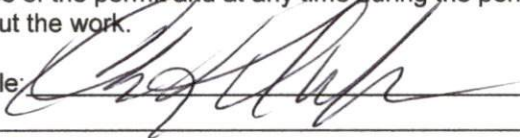
The undersigned applicant being the:

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:  Date: 01232019