09/09/11

Harnett County Central Permitting PO Box 65 Lillington NC 27546 910 893 7525 Fax 910 893 2793 www harnett org/permits Application #

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 Lamco Homes	Date			
Site Address Lot A22, 655 Ponderosa Trail, Cameron NC	28326 Phone <u>919-935-9282</u>			
Directions to job site from Lillington Turn right onto S 2nd St, turn right onto	E Ivey St, turn left onto S Main St, turn right onto			
W old rd, take a slight left turn onto NC 27 W, turn right onto johnsonville school rd, to				
Ponderosa Trail.				
Subdivision Carolina Seasons	Lot A22			
	# of Bedrooms 3			
Heated SF 1612 sq ft. Unheated SF 468 sq ft. Finished Bonus Room				
General Contractor Informa	<u>ation</u>			
Lamco Homes	919-307-4254			
Building Contractor's Company Name	Telephone			
7424 Chapel Hill Rd Ste 203, Raleigh NC 27607	lamcocustombuilders@gmail.com			
Address	Email Address			
59567				
License #	at			
Description of Work New Electrical Service Si	<u>ation</u> izeAmps T-PoleYesNo			
JM Pope Electric, Inc	WESTER SERVICES AND A SECOND CO.			
Electrical Contractor's Company Name	919-776-5144 Telephone			
409 Chatham St, Sanford NC 27330	relephone			
Address	Email Address			
21326L	Email / Idai 633			
License #				
Mechanical/HVAC Contractor Inf	formation			
Description of Work New Construction HVAC				
Total Systems Heating and Cooling, Inc	910-436-3450			
Mechanical Contractor's Company Name	Telephone			
13341 NC HWY 210 S, Spring Lake NC 28390	parts@totalsystemsnc.com			
Address	Email Address			
28846				
License #				
Plumbing Contractor Inform	ation			
Description of Work New Construction	# Baths			
A & M Contractors, Inc	910-652-6230			
Plumbing Contractor's Company Name	Telephone			
PO Box 1020, Ellerbe NC 28338				
Address	Email Address			
28648				
License #				
Insulation Contractor Inform				
Tri-City Insulation, 7204 Becky Circle, Raleigh NC	_919-369-4730 Telephone			
Insulation Contractor's Company Name & Address	relebrione			

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 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 X 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

Lamco Homes

Sign w/Title

Tony Toro, VP of Construction

Date _____

OP ID: D4

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/12/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED

REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

th	nis certificate does not confer rights to	the					en de 1 00 mai 1900 de la composició de	20 COMP 10 TARES		
	DUCER		704	1-226-1300	CONTACT Michael S Street					
	bins & Associates irance Agcy., Inc.				PHONE (A/C, No, Ext): 704-226-1300 FAX (A/C, No): 704-226-1320					
P O Box 1458					E-MAIL Mike@robbinsandassociates.com					
	nroe, NC 28111 hael S Street				INSURER(S) AFFORDING COVERAGE NAIC #					
minute o otroct			INSURER A : Frankenmuth Mutual Ins Co				13986			
INSURED LAMCO Custom Builders LLC 7424 Chapel Hill Rd ste 203 Raleigh, NC 27607			INSURER B:							
			INSURER C :							
					INSURER D :					
					INSURER E :					
	VED 1050				INSURER F:					
				NUMBER:	REVISION NUMBER:					
C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I XCLUSIONS AND CONDITIONS OF SUCH I	QUIF	REME AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORDS	OF ANY CONTRACT ED BY THE POLICIE	OR OTHER I	DOCUMENT WITH RESPEC	T TO V	WHICH THIS	
INSR LTR			SUBR			POLICY EXP (MM/DD/YYYY)	LIMITS	85		
A	X COMMERCIAL GENERAL LIABILITY	IIVOU	1440		[MM/DD/TTTY]	MIM/DD/TTTT)			1,000,000	
	CLAIMS-MADE X OCCUR			6634022	07/15/2019	07/15/2020	DAMAGE TO RENTED	\$	500,000	
							MED EXP (Any one person)	\$	5,000	
							PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER						GENERAL AGGREGATE	\$	2,000,000	
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	2,000,000	
	OTHER:							S		
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO						BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS			2			BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE	\$		
								s		
Α	X UMBRELLA LIAB X OCCUR						AND ADDRESS MADERALISM AND ADDRESS AND ADD	s	1,000,000	
	EXCESS LIAB CLAIMS-MADE	EXCESS LIAB CLAIMS-MADE 6634022	6634022	07/15/2019	07/15/2020	500-19-000-19-00-00-00-00-00-00-00-00-00-00-00-00-00	s	1,000,000		
	DED X RETENTIONS 10000						NOONEONIE	c		
Α	NORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				X PER OTH-	<u> </u>	16		
				6634021	07/15/2019	07/15/2020	CONTRACTOR	s	500,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)				J. S.		E.L. DISEASE - EA EMPLOYEE		500,000	
	if yes, describe under DESCRIPTION OF OPERATIONS below								500,000	
	DESCRIPTION OF OPERATIONS BEIOW						E.L. DISEASE - POLICY LIMIT	\$		
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	0 101, Additional Remarks Schedul	le, may be attached if mo	re space is requir	ed)			
CE	RTIFICATE HOLDER				CANCELLATION					
				HARNET1						
					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE					
Harnett County					THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
PO Box 65				ACCOUNTS WITH THE FOLIOT FROMOTORS.						
	Lilligton, NC 27546			AUTHORIZED REPRESENTATIVE						
			Line Nothis							
AC	ORD 25 (2016/03)				© 10	88-2015 AC	ORD CORPORATION A	II riah	te reserved	

2020

59567

North Carolina

Licensing Board for General Contractors

This is to Certify That:

Lamco Custom Builders, LLC Raleigh, NC

is duly registered and entitled to practice

General Contracting

Limitation: Intermediate Classification: Building



December 31, 2020

when this Certificate expires. Witness our hands and seal of the Board. Dated, Kaleigh, N.C.

January 1, 2020

This certificate may not be altered.

J. J. P. Sho

Chairman

C. Frank Wiesner

