



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: TRENTON L. BROOKS Date: 8-26-2020
Site Address: 786 LENNIE SMITH RD. FUQUAY VARINA, N.C. Phone: 336 408-1341
Subdivision: _____ Lot: _____
Description of Proposed Work: NEW HOME BUILD Total Job Cost: \$ 310,000.00

General Contractor Information

ALLAN CANADY BUILDER 919 427-4675
Building Contractor's Company Name Telephone
2412 EDDIE HOWARD RD. WILLOW SPRING, N.C. ACANADY639@AOL.COM
Address 27592 Email Address
39466
License #

Electrical Contractor Information

Description of Work NEW WIRING Service Size: 200 Amps T-Pole: Yes No
R. A. JACKSON ELECTRIC 919 894-5367
Electrical Contractor's Company Name Telephone
9261 RALEIGH RD BENSON, N.C. RAJACKSONELECTRIC@EMBARCMAIL.COM
Address 27504 Email Address
21144
License #

Mechanical/HVAC Contractor Information

Description of Work NEW HOUSE HVAC
STEPHENSON HVAC 919 329-0686
Mechanical Contractor's Company Name Telephone
343 SHIPWASH DR. GARNER, N.C. 27529 STEPHENSONHVAC@AOL.COM
Address Email Address
18644
License #

Plumbing Contractor Information

Description of Work NEW PLUMBING # Baths 2.5
L. R. GLOVER PLUMBING 919 820-0026
Plumbing Contractor's Company Name Telephone
111 CAROLYN DR. BENSON, N.C. 27504
Address Email Address
7958
License #

Insulation Contractor Information

INSALATED INC. 919 772-9000
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.

Allen Candy
Signature of Owner/Contractor/Officer(s) of Corporation

8-26-2020
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: Allen Candy PRES. ALLAN CANDY BUILDER Date: 8-26-2020

DO NOT REMOVE!**Details: Appointment of Lien Agent**

Entry #: 1301746

Filed on: 08/26/2020

Initially filed by: Allan

Designated Lien Agent

North American Title Insurance Company

Online: www.liensnc.com (mailto:info@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)**Owner Information**

Allan D Canady
2412 Eddie Howard Road
Willow Spring, NC 27592
United States
Email: acanady639@aol.com
Phone: 919-427-4675

Project Property

Trent Brooks Job
786 Lennie Smith Rd.
Fuquay Varina, NC 27526
Harnett County

Property Type

1-2 Family Dwelling

Date of First Furnishing

09/15/2020

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.

View Comments (0)

Technical Support Hotline: (888) 690-7384