

Application # SF02104. Ode1

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

on on license.	
Owner's Name: Kenny + Jean Johnson	Date: 5-11-2021
Owner's Name: Kenny + Jean Johnson Site Address: 130 McLeod Ln, Dunn, NC 28	334 Phone: 910-508-0029
Subdivision: JAMES W ME LEOD	Lot: # 4
Description of Proposed Work: Exect 1850 Sfd	Total Job Cost: \$ 230,000.00
General Contractor Information	
Tames Jackson Home Buildors Building Contractor's Company Name	919-820-5366
Building Contractor's Company Name	Telephone
436 OAK VAlley Farm Rd, Coats, NC27521	huilder 436@gmail.com
License # HEATED SQ FT 1850 GARAGE SC	11 100
Electrical Contractor Informatio	<u>n</u>
Description of Work Install wiring Service Size:	
PATRICK Elec Contractors Electrical Contractor's Company Name	916- 237- 1594 Telephone
	relephone
1309 N. MAINST, Lillington, NC27546 Address	Email Address
4910 U	
License #	
Mechanical/HVAC Contractor Information	
Description of Work Install heat pump	
Custom Heating + Air Mechanical Contractor's CompanyName	919-820-3079
Mechanical Contractor's Company Name	Telephone
1001 Denim DR, ERWIN, NC 38339	Email Address
12195	Elifali Address
License #	
Plumbing Contractor Information	
Description of Work Install water & sewer	_# Baths
Shawn Glover Plumbing Plumbing Contractor's Company Name	919-868-0959
Plumbing Contractor's Company Name	Telephone
304 Quail Hollow Ept., Sanford, NC	Email Address
23160	Ellian Fladioso
License #	
Insulation Contractor Information	
Insulation INC PO Boy 274 San Ford	919-776-4138
Insulation Contractor's Company Name & Address	Lelephone



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.

ignature 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.	
Sign w/Title: am R. Aarban owner Date: 5/12/2021	

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 1461946

Filed on: 05/12/2021 Initially filed by: jbuilder

Designated Lien Agent

Project Property

Investors Title Insurance Company

Online: www.liensnc.com Address: 223 S. West Street, Suite 900 /

Raleigh, NC 27603 Phone: 888-690-7384 Fax: 913-489-5231

Email: support@liensnc.com

130 Willie McLeod Lane Dunn, NC 28334 Harnett County

Property Type

1-2 Family Dwelling

Owner Information

Date of First Furnishing

James Jackson 436 Oak Valley Farm Rd Coats, NC 27521 United States

Email: jbuilder436@gmail.com Phone: 919-820-5366

05/12/2021

View Comments (0)

Technical Support Hotline: (888) 690-7384

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