

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

Application # _	
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Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Att XA TOYYCS	Date 5/31/24
Site Address: 421 WOUSIDE LN, BUNNICUEL, NC 28323	Phone <u>(919) 427-76</u> 2
	Lot <u>N/A</u>
Description of Proposed Work: NEW YOME CONSTRUCTOR	
General Contractor Information	
Kaunor Builders Inc.	(919) 427 - 7521
Building Contractor's Company Name	Telephone
725 N. Rayeigh street, Angier, NC 27501	Raynorbuildersinc egmail.com Email Address
Address	
40079 HEATED SQ FT 1254 GARAGE SQ	FT_NIA_
License #	
Description of Work Now Now Contractor Information	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	daniel@mabryelectrical.com
Address	Email Address
<u>15077-U</u>	
License # Mechanical/HVAC Contractor Information	ation
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Description of Work NOW NOW CONSTRUCTION	1010) 220 5001
Stephenson Heating and Air, The. Mechanical Contractor's Company Name	(9 9) 329-0686 Telephone
	•
343 Shipwash drive, Gorner, NC22529 Address	Stephanson NVI C @ 001. COM Email Address
186044	Email / Idarooo
License #	
Plumbing Contractor Information	<u>.</u>
Description of Work Wew Yowy CONSTRUCTION	_# Baths2
Price Roufing	(910) 890 -1350
Plumbing Contractor's Company Name	Telephone
19 CT Thomas Lane, Lillington, NC 27546	Price roofing the yanoo com
Address	Email Address
<u>142-34384</u>	
License # Insulation Contractor Information	<u>1</u>
LIVEGYPPN 5001 DICH POOLE Kd., ROJERAN INC 276/10	(919) 453-10411
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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> and if <u>any</u> 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.

5/31/24 Date

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.		
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		
Sign w/Title: Date: 6 31 24		

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 2160831

Filed on: 05/31/2024 Initially filed by: builderaray

Print & Post

Contractors:

project.

Please post this notice on the Job Site.

phone to view this filling. You can then file a Notice to Lien Agent for this

Suppliers and Subcontractors: Scan this image with your smart

Designated Lien Agent

Project Property

Investors Title Insurance Company

421 Wayside Ln Bunnlevel, NC 28323 Harnett County

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

Raleigh, NC 27603 Phone: 888-690-7384

Property Type

Fax: 913-489-5231

1-2 Family Dwelling

Owner Information

Alexa Torres 5753 Brushy Meadows Dr Fuquay Varina, NC 27526

United States Email: raynorbuildersinc@gmail.com

Phone: 919-427-7521

Date of First Furnishing

06/21/2024

View Comments (0)

Technical Support Hotline: (888) 690-7384