

Application #

Must be owner/occupier or licensed contractor. Address, company name & phone must 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

match information on license. Application for Residential Building and Trades Permit Lot 3R Description of Proposed Work: Total Job Cost **General Contractor Information** Building Contractor's Company Name lectrical Contractor Information Wew SEH Service Size: Amps T-Pole: Yes No Mechanical/HVAC Contractor Information Mechanical Contractor's Company Name Address 23261 License # Plumbing Contractor Information 29022 Insulation Contractor Information

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

Insulation Contractor's Company Name & Address



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. 11/18/2024 Date

nature 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: Date: 11/18/2024

DO NOT REMOVE!

Details: Appointment of Lien Agent

Entry #: 2266789

Filed on: 11/18/2024 Initially filed by:

bryan.thphomes@gmail.com

Designated Lien Agent

Chicago Title Company, LLC

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

Project Property

Lot 3R Hobby Rd 233 Hobby Rd Holly Springs NC, NC 27540 Harnett County

Property Type

1-2 Family Dwelling

Owner Information

Triangle Home Pros, LLC 6312 Lauraca Ln Fuquay Varina, NC 27526 United States

Email: thphomes@gmail.com Phone: 919-346-1528

Date of First Furnishing

11/18/2024

Print & Post



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