

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

Application # \_\_\_

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: Kenneth McGlothlin Const. INC.	Date 12-10-24
Site Address: 962 Spring Hill Ch. Rd	Phone 919-(ala9-702)
Subdivision:	
Description of Proposed Work:	Total Job Cost \$ 130 000
General Contractor Information	
Kenneth McGhirhlin Court Tax	919-11-9-707/2
Building Contractor's Company Name	919-669-7026 Telephone
97 Shooting Star LN Fuguey Varing NC 27526	Telephone  KMCINC. Kesseth & g. Mail. con Email Address
License # HEATED SQ FT 1290 GARAGE SC	OFT NA
Description of Work New SFD Electrical Contractor Information  Service Size:	<u>n</u>
Service Size:	200 Amps T-Pole: Ves No
Alpha 3 Omega Electrical NCLLC Electrical Contractor's Company Name	919-649-3418 Telephone
1084 Lake Ridge DR, Creed moor NC 27522 Address	Ludwig electrical egmail.com Email Address
24828	
License #  Mechanical/HVAC Contractor Inform	-4:
Description of Work SFD	lation
	Old ded and
Mechanical Contractor's Company Name	910-858-0000 Telephone
P.O. Box 1071 Hope Mills NC 28348	Carlie
Address	Certified heat Air ey grant . com Email Address
20012 H2C1 License #	
Plumbing Contractor Information	
Description of Work New SFD	_# Baths
Thornton's Plumbing Tuc. Plumbing Contractor's Company Name	919-550 - 4833 Telephone
3160-A Vinson Rd. Clayton NC 27527 Address	TPI office 2 eg Mail: COM Email Address
22152	Email / Mail 633
License #	
Insulation Contractor Informatio	
Insulation Contractor's Company Name & Address	919-661-0999 Telephone
	I CICDITOTIC

\*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.

12-10-24

Signature of Owner/Contractor/Officer(s) of Corporation Date	
Affidavit for Worker's Companyation N.C.C. 97.44	
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: 12-10-24	

## DO NOT REMOVE!

# Details: Appointment of Lien Agent

Entry #: 2279206

Filed on: 12/10/2024 Initially filed by: kmcinc

#### Designated Lien Agent

First American Title Insurance Company

Online: www.liensnc.com (http://www.liensr

Address: 223 S. West Street, Suite 900 /

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

Email: support@liensnc.com [mailto:support@blensnc

#### **Project Property**

962 Spring Hill Church Rd Lillington, NC 27546 Harnett County

### Property Type

1-2 Family Dwelling

#### Contractors: Please post this notice on the Job Site.

Print & Post

**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

#### Owner Information

KENNETH MCGLOTHLIN CONSTRUCTION INC.

97 Shooting Star Ln Fuquay Varina, NC 27526

United States

Email: kmcinc.kenneth@gmail.com

Phone: 919-669-7026

### Date of First Furnishing

12/16/2024

View Comments (0)

Technical Support Hotline: (888) 690-7384