



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

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

**Application for Residential Building and Trades Permit**

Owner's Name: Jeffrey Stewart Date 6/6/23  
Site Address: 9665 NC Hwy 27 E, Benson NC 27504 Phone 910.443.5284  
Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_  
Description of Proposed Work: Addition/Remodel Total Job Cost \$250,000.00

**General Contractor Information**

Stewart Group Enterprises, LLC 919.894.2680  
Building Contractor's Company Name Telephone  
115 S Railroad St, Benson NC 27504 jeffrey@stewartgroupenterprises.com  
Address Email Address  
69804 **HEATED SQ FT 3140** **GARAGE SQ FT 609**  
License # \_\_\_\_\_

**Electrical Contractor Information**

Description of Work Electrical Renovation Service Size: 200 Amps T-Pole:  Yes \_\_\_ No  
Mabry's Electrical 919-828-6012  
Electrical Contractor's Company Name Telephone  
639 Mabry Road, Angier NC 27521 johnnie@mabryelectrical.com  
Address Email Address  
15077  
License # \_\_\_\_\_

**Mechanical/HVAC Contractor Information**

Description of Work Mechanical Renovation  
B & S Heating & Air 919.291.2215  
Mechanical Contractor's Company Name Telephone  
5446 Elevation Road, Benson NC 27504 barrybarbour@centurylink.net  
Address Email Address  
4256  
License # \_\_\_\_\_

**Plumbing Contractor Information**

Description of Work Plumbing Renovation # Baths 2.5  
Williford Plumbing 919-915-0533  
Plumbing Contractor's Company Name Telephone  
855 Jernigan Loop Road, Dunn NC 28334 jobphone123@icloud.com  
Address Email Address  
30747  
License # \_\_\_\_\_

**Insulation Contractor Information**

Parker Brothers Insulation, 825 Kitty Fork Rd, Clinton NC 28328 910.564.4132  
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.**

6/6/23

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

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: \_\_\_\_\_ Date: 6/6/23  
Vice President