

Application for Building and Trade Permit

Owner's Name: Benjamin Gray Real Estate Services, Inc. Date: _____
Address: 2631 Darroch Rd. Lillington NC 27546 Phone: 910-779-0019
Directions to job site: _____

Subdivision: Darroch Rd. Lot: 2-B

Construction Type: (Please Check) Building Use: (Please Check)
 New Residential
 Renovation Modular
 Addition Commercial
 Moved House Multi-Family
 Other

Description of Proposed Work: NEW SFR
Total Project Cost: \$ 200,000.00

Building Permit Information

Heated SF _____ Crawl Space
Unheated SF _____ Slab
Same as owner
Building Contractor's Company Name PO Box 53798 Fayetteville, NC 28305
Address _____
Building Construction Cost \$ 200,000.00
Acres Disturbed _____ Stories _____
Telephone 910-779-0019
License # 1091233-U

Signature of Officer(s) of Corporation _____

Electrical Permit Information

Description of Work New Install Electrical Cost \$ _____
TS Pole: Yes No Underground Overhead
Permanent Service: Underground Overhead Service Size: _____ Amps
Pioneer Electric
Electrical Contractor's Company Name _____ Telephone 919-499-7767
80 Neil Thomas Rd. Lillington NC 27546 Address _____ License # 21643-U

Signature of Officer(s) of Corporation _____

Mechanical Permit Information

Description of Work New Install Mechanical Cost \$ _____
Number of Units 1 Type System split
Certified Heating and Air Condition
Mechanical Contractor's Company Name _____ Telephone 910-858-0000
PO Box 1071 Hope Mills NC 28348 Address _____ License # 2001243-C1

Signature of Officer(s) of Corporation _____

Plumbing Permit Information

Description of Work New Install Plumbing Cost \$ _____
Number of Baths _____
Dell Haire Plumbing
Plumbing Contractor's Company Name _____ Telephone 910-429-9939
620 Gillespie St. Fayetteville NC 28306 Address _____ License # 32886 P-1

Signature of Officer(s) of Corporation _____

Insulation Permit Information

Residential Other Not Required
Tricity
Insulation Contractor's Company Name _____ Address 334 Mountain Dr. Fay, NC 28306 Telephone 910-486-8855

Sprinkler System Information

Sprinkler Contractor's Company Name _____ Telephone _____
Contact Person _____
Address _____ License # _____
Signature of Officer(s) of Corporation _____

Fire Alarm System Information

Fire Alarm Contractor's Company Name _____ Telephone _____
Contact Person _____
Address _____ License # _____
Signature of Officer(s) of Corporation _____

Driveway Access

NC Department of Transportation Driveway Access/Permit? Yes ___ No

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 if any changes occur in the above contractors I certify it is my responsibility to notify the Harnett County Inspections Division of any changes.

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

5/19/2020
Date

The undersigned applicant for Building Permit # _____ being the:

- 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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.
- Has/have one (1) or more subcontractors(s) and has/have obtained workers' compensation insurance to cover them.
- Has/have one (1) or more subcontractors(s) who has/have their own policy of workers' compensation insurance covering themselves.
- Has/have not 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.

Firm Name: BRESS INC
By/Title: D. St., President
Date: 5/19/2020