

Application # _____

Harnett County Central Permitting PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* Each section below to be filled out by whomever performing work. 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: Benjamin Stout Peal Estate Serv	icos Inc. Date: 3/1/21
Site Address: Tanna Place	Phone: 910-779-6019
Subdivision: Forest Ridge	Lot: \2
Description of Proposed Work: New SFD	Total Job Cost: \$229, 950
	17
General Contractor Information	
Benjamin Start Peal Estate Services, Inc. Building Contractor's Company Name	910-779-0019 Telephone
PO Box 53798, Fayetteville, NC 28305 Address	Megane benstoutconstr Email Address
1091033-4 HEATED SOFT 2,389 GARAGES	0 FT 559
License # Electrical Contractor Informati	on
Description of Work New Install Service Size	200 Amps T-Pole: Yes No
Southern Pride Electrical	919-750-9436
Electrical Contractor's Company Name	Telephone
370 Slapout Rd., Mt. Olive, NC 28365	
Address	Email Address
24726 mail romando que la seria de la como dela como de la como de	
License # Mechanical/HVAC Contractor Infor	mation
	mation to the second (1) we are a V
Description of Work New Install	Out OFFI
Certified Heating &AC	910-828-0000
Mechanical Contractor's Company Name	Telephone
PO BOX 1071, Hope Mills, NC 28348	Problem and transport and transport of the
Address	Email Address
20012-H3-Cl	
License # Plumbing Contractor Informati	on
Description of Work New Install	# Baths
Titan's Plumbing LC	919-902-0990
Plumbing Contractor's Company Name	Telephone
11034 Brook Fern Way, Raleigh, NC 27409	Frank Address
Address	Email Address
34800 C-1	
License # Insulation Contractor Informat	ion
Tricity 334 Mountain Dr. Faultteville, NC 28304	
Insulation Contractor's Company Name & Address	Telephone
membership activated a activative to the property	

*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 ree schedule	FIE WOLF
() O'M	3/1/21
Signature of Owner/Contractor/Officer(s) of C	Corporation Date Date
mayor of the steel of the	PC BOX 53174. I Ingaranine, Mc 25-105
Affidavit for Work The undersigned applicant being the:	er's Compensation N.C.G.S. 87-14
General Contractor Owner	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury set forth in the permit:	that the person(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and	has obtained workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) them.	and has obtained workers' compensation insurance to cover
	who has their own policy of workers' compensation insurance
covering themselves. Has no more than two (2) employees a	and no subcontractors.
Department issuing the permit may require co	ermit is sought it is understood that the Central Permitting ertificates of coverage of worker's compensation insurance prior ng the permitted work from any person, firm or corporation
Sign w/Title:	President Date: 3/1/21
	THE PROPERTY STATES

1364 Brace Fam Way, Paleigh : . C 21641



Initial Application Date: 11 16/2020

nitial Application Date: 11/10/2020	Application #	
	CU#	
COUNTY OF HARNETT RESIDENTIAL Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910)	LAND USE APPLICATION) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits	
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE	PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION	
ANDOWNER: Benjamin Stut Real Estate Services Inc	dress: <u>Po Box 53798</u>	
city. Fayetterle state NC zip: 2836 Contact No:	910-779-0019 Email: Megan Chenstaut construction	
APPLICANT: Benjamin Stout Real Estate Mailing Address: PC	Box 53798	
City: + CUC++CVIVE State: VC Zip: 28305 Contact No: Please fill out applicant information if different than landowner		
ADDRESS: Tahna Place PIN	9584-95-0106.000	
Zoning: 0.65 Flood: Minima! Watershed: NO Deed Book / Page acres	e: <u>2285</u> : 0427	
Setbacks - Front: Back: Side: Corn	er:	
	eter wall	
PROPOSED USE:	Monolithic	
SFD: (Size 40' x 51') # Bedrooms: 4 # Baths: 3 Basement(w/wo bath):	_ Garage: Deck: Crawl Space: Slab: Slab:	
(Is the bonus room finished? () yes () no w/ a cl	oset? () yes () no (if yes add in with # bedrooms)	
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath)	_ Garage: Site Built Deck: On Frame Off Frame	
(Is the second floor finished? () yes (_) no Any	other site built additions? () yes () no	
☐ Manufactured Home:SWDWTW (Sizex) # Bedroo	ms: Garage:(site built?) Deck;(site built?)	
□ Duplex: (Sizex) No. Buildings:No. Bedrooms Pe	r Unit:	
	#Employees	
Home Occupation: # Rooms: Use: Home	urs of Operation	
	Closets in addition? () ves () no	
Addition/Accessory/Other: (Sizex) Use:	Closels in addition: () yes () no	
	the state of house annually water before final	
Water Supply: County Existing Well New Well (# of dwellings	Well Application at the same time as New Tank)	
Sample Now Septic Tank Expansion Relocation Exist	ing Septic Tank 🗸 County Sewer	
(Complete Environmental Health Checklist on other side of application Does owner of this tract of land, own land that contains a manufactured home within		
Does owner of this tract of land, own land that contains a manufactured from ewithin Does the property contain any easements whether underground or overhead () ye	,	
Structures (existing or proposed): Single family dwellings: Manufa	ctured Homes:Other (specify):	
If permits are granted I agree to conform to all ordinances and laws of the State of N I hereby state that foregoing statements are accurate and correct to the best of my k	nowledge. Permit subject to revocation it raise anothration is provided.	
') UM	1//16/2020 Date	
Signature of Owner or Owner's Agent ***It is the owner/applicants responsibility to provide the county with any appl	Date Cable information about the subject property, including but not limited	
to boundary information, house location, underground or overhead easer	nents, etc. The county of its employees are not responsible for any	
Incorrect or missing information that is contained within these applications.*** *This application expires 6 months from the initial date if permits have not been issued**		
*This application expires 6 months from the init	ai date it permits nave not been issued	

APPLICATION CONTINUES ON BACK

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