

Application # _____

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

Application for Residential Building and Trades Permit

tion on license.	
Owner's Name: Benjamin Staut Real Estate Servi	ces, nc. Date: 3/1/21
Site Address: Janna Place	Phone: 910-779-0019
Subdivision: Forest Ridge	Lot:31
Description of Proposed Work: New SFD	Total Job Cost: \$279,950
General Contractor Informatio	
Benjamin Start Peal Estate Services, Inc. Building Contractor's Company Name	910-779-0019 Telephone
PO Box 53798. Fayetteville, NC 28305	Megane benstoutconstr Email Address
License #	OFT 461
Description of Work New Install Service Size:	200 Amps T-Pole: Yes No
Southern Pride Flectrical Electrical Contractor's Company Name	919 - 750 - 9436 Telephone
370 Slapout Rd., Mt. Olive, NC 28365 Address	Email Address
2+72 License # Mechanical/HVAC Contractor Infor	Trent
The second secon	terrino di maroni cari Pi, ista est I , iste
Description of Work New Install	910-858-0000
Certified Heating LAC Mechanical Contractor's Company Name	Telephone
PO Box 1071. Hope Mills, NC 28348	·
Address	Email Address
20012- H3-CI	
License #	2 C Show but the deligner
Plumbing Contractor Informat	
Description of Work New Install	# Baths
Titan's Pumbina LLC Plumbing Contractor's Company Name	919-902-0990 Telephone
Plumbing Contractor's Company Name	Telephone
1184 Brook Fern Way, Raleigh, NC 27409 Address 34800 C-1	Email Address
License # Insulation Contractor Information	tion
Tricity 334 Mountain Dr., Fautheville, NC 18300 Insulation Contractor's Company Name & Address	0 . 110. 0.0.

*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.

changes, I certify it is my responsibility to notify the Harnett County Central Permitting De any and all changes.	partment of
EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years	rs re-issue fee
is as per current fee schedule.	
2/1/21	
Signature of Owner/Contractor/Officer(s) of Corporation Date	Call magice
. The second sec	line of the
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	12 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
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) per 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 insu them.	rance to cover
Has one (1) or more subcontractors(s) who has their own policy of workers' compens covering themselves.	ation insurance
Has no more than two (2) employees and no subcontractors.	10.1114
While working on the project for which this permit is sought it is understood that the Central Pepartment issuing the permit may require certificates of coverage of worker's compensation to issuance of the permit and at any time during the permitted work from any person, firm or carrying out the work. Sign w/Title: Date: 3	n insurance prior corporation

" - The Contract of the Contract



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	CU#
Central Ferniang	893-7525 ext;2 Fax: (910) 893-2793 www.namet.org/porting
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE	PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION
ANDOWNER Benjamin Start Real Estate Services Inc	ress: 16 Box 53798
city: Fayetteville state: NC Zip: 28365 Contact No: 9	10-1-19-00 Email Megan Constitution of the com
APPLICANT : Bengin Stout Real Estate Mailing Address: Po	Box 53798
City: TOUTHOUSE State: Nr. Zip: 28305 Contact No: 9	0-979-00)9 Email: COSOPOPOIC DEPONACION STUDIO
ADDRESS: Janna Place PIN:	9584-84-9790.000
Zoning: PA 200 Flood: Flood Watershed: NO Deed Book / Page	e: <u>2285 :</u> 6427
Setbacks - Front: Back: Side: Corne	er:
PROPOSED USE: SFD: (Siz. 44 x 38') # Bedrooms: 4 # Baths: 8 Basement(w/wo bath):	Garage: Deck: Crawl Space: Slab: Slab:
(Is the bonus room finished? () yes () no w/ a clo	set? () yes () no (if yes add in with # bedrooms)
☐ Mod: (Sizex) # Bedrooms# BathsBasement (w/wo bath)_ (Is the second floor finished? () yes () no Any of	_ Garage: Site Built Deck: On Frame Off Frame
Manufactured Home: _SW _DW _TW (Sizex) # Bedroom	ns: Garage:(site built?) Deck:(site built?)
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per	Unit:
☐ Home Occupation: # Rooms: Use: Ho	urs of Operation:#Employees:
Addition/Accessory/Other: (Sizex) Use:	Closets in addition? () yes () no
Water Supply: County Existing Well New Well (# of dwellings (Need to Complete New)	
Sewage Supply: New Septic Tank Expansion Relocation Exist (Complete Environmental Health Checklist on other side of application Does owner of this tract of land, own land that contains a manufactured home within	ing Septic Tank County Sewer
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 NI hereby state that foregoing statements are adjurate and correct to be best of my kind.	was a literal problem of the specifications of plans submitted.

Signature of Owner's Agent

Date

It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or 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.**

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APPLICATION CONTINUES ON BACK

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