

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 Stout Real Estate Servi                               | ces, Inc. Date: 3/1/21                  |
| Site Address: 430 Mejody Ln.   | Phone: 910-779-0019                     |
| Subdivision: Forest Ridge  | Lot:13                                  |
| Description of Proposed Work: New SFD  | Total Job Cost:                         |
| General Contractor Information   |   |
| Benjamin Start Real Estate Services, Inc. Building Contractor's Company Name | 910-779-0019<br>Telephone               |
| PO Box 53798, Fayetteville, NC 28305 Address                                 | Megane benstrutconstru<br>Email Address |
| 109633-4 HEATED SOFT 2,441 GARAGE ST   | 113 H                                   |
| License #  Electrical Contractor Information                                 | on .                                    |
| Description of Work New Install Service Size:                                | 200 Amps T-Pole: Yes No                 |
| Southern Pride Electrical Electrical Contractor's Company Name               | 919 - 750 - 9436<br>Telephone           |
| 370 Slapout Rd. Mt. Olive, NC 28365  | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Address 7 247 240  | Email Address                           |
| License #  |   |
| Mechanical/HVAC Contractor Inform  | nation                                  |
| Description of Work New Install  | ulanin non us service (17) entre sec    |
| Certified Heating &AC  | 910-858-0000                            |
| Mechanical Contractor's Company Name   | Telephone                               |
| PO BOX 1071, Hope Mills, NC 28348  | 30.00                                   |
| Address  | Email Address                           |
| 20012 - H3-CI<br>License #   |   |
| Plumbing Contractor Information  | on .                                    |
| Description of Work New Install  | # Baths                                 |
|  | 919-902-0990                            |
| Titan's Plumbing LLC Plumbing Contractor's Company Name                      | Telephone                               |
| 1184 Brook Fern Way, Raleigh, NC 27409 Address 34800 C-1 License #           | Email Address                           |
| Insulation Contractor Information  |   |
| Insulation Contractor's Company Name & Address                               | 90-486-8855<br>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.   |
|   |
| Signature of Owner/Contractor/Officer(s) of Corporation  Date   |
| Signature of Owner/Contractor/Officer(s) of Corporation Date  |
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| 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.  |
| Sovering memory co.   |
| 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: 3/1/21  |
|   |



| Initial Application Date:  | Application #   |  |
|--|---|--|
|  | CU#   |  |
| COUNTY OF HARNETT RESIDENTIAL Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910)  | LAND USE APPLICATION  0) 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**  |   |  |
| LANDOWNER: Benjumin Stout Real Estate Services alling Address: DO BOX 53798  |   |  |
| City: Fayetteville State: NC Zip: 28305 Contact No: 9  |   |  |
| APPLICANT Benjamin Stout Real Estate SVS. Inc. Po Box 53798  |   |  |
| City: FOURTHEVINE State: NC Zip: 28305 Contact No: 910 - 979 - 2019 Email: Residential Construction of different than landowner  |   |  |
| ADDRESS: 436 Melody Ln. PIN  | 9594-05-4503-000  |  |
| Zoning: 1.0 Flood: Flood Watershed: NO Deed Book / Page: 3172:0937   |   |  |
| Setbacks - Front: Back: Side: Corn   | er:   |  |
| PROPOSED USE:  Monolithic  |   |  |
| SFD: (Size 44 x 31) # Bedrooms: 4 # Baths: 3 Basement(w/wo bath):  | Garage: Deck: Crawl Space: Slab: Slab:  |  |
|  | 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: _SW _DW _TW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)   |   |  |
| □ Duplex: (Sizex) No. Buildings: No. Bedrooms Pe   | r Unit:   |  |
| ☐ Home Occupation: # Rooms: Use: Home  | ours of Operation:#Employees:   |  |
| Addition/Accessory/Other: (Sizex) Use:   | Closets in addition? () yes () no   |  |
| Water Supply: County Existing Well New Well (# of dwellings using well) *Must have operable water before final   |   |  |
| (Need to Complete New Sewage Supply: New Septic Tank Expansion Relocation Exist  | Well Application at the same time as New Tank)                                      |  |
| (Complete Environmental Health Checklist on other side of application Does owner of this tract of land, own land that contains a manufactured home within  | on if Septic)   |  |
| Does the property contain any easements whether underground or overhead () ye  | es 🗹 no   |  |
| 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 if false information is provided.            |  |
|  | 3/2/21  |  |
| Signature of Owner or Owner's Agent  ***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** |   |  |

APPLICATION CONTINUES ON BACK

strong roots • new growth

Forey amore small real Estate Server. ""
Jeneuville No. 2007

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