



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: Southern Built, LLC Date _____
Site Address: 1321 Cobb Road Benson Phone 919-868-2515
Subdivision: Not in subdivision Lot 5C
Description of Proposed Work: Single family Total Job Cost _____

General Contractor Information

Southern Built, LLC Telephone 919-868-2515
Building Contractor's Company Name
PO Box 1112 Clinton NC 28329 Email Address Juliestancilmoores@gmail.com
Address
77897 HEATED SQ FT 1514 GARAGE SQ FT 420 145,344
License # 15540

Electrical Contractor Information

Description of Work SFD Service Size: 20 Amps T-Pole: Yes No
SNO Electrical Telephone 919-427-6952
Electrical Contractor's Company Name
19655 Hwy 210 Angier NC 27501 Email Address _____
Address
13075-L
License # _____

Mechanical/HVAC Contractor Information

Description of Work SFD
Stephenson Heating & Air Telephone 919-329-0686
Mechanical Contractor's Company Name
343 Shipwash Dr Garner NC Email Address _____
Address 27529
License # 18644

Plumbing Contractor Information

Description of Work SFD # Baths 2
Barnes Plumbing Inc Telephone 919-422-2133
Plumbing Contractor's Company Name
239 Millwood Lane Angier NC Email Address _____
Address 27501
License # P17735

Insulation Contractor Information

Tatum Insulation 519 Old Drug Store Rd Telephone 919-661-0999
Insulation Contractor's Company Name & Address
Garner NC 27529

*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.

Julie S Moore
Signature of Owner/Contractor/Officer(s) of Corporation

9/17/21
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: Julie S Moore

Date: 9/17/21