

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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

Application for Residential Building and Trades Permit

Owner's Name: Benjamin Stout Real Estate Services, Inc.	Date <u>01/31/2022</u>
Site Address: PIN# 0546-31-3156.000	Phone 910-779-0019
Subdivision: Walker Road	Lot1
Description of Proposed Work: New Single Family Dwelling	
General Contractor Information	
Benjamin Stout Real Estate Services, Inc.	010 770 0010
Building Contractor's Company Name	910-779-0019 Telephone
P.O. Box 53798 Fayetteville, NC 28305 Address	permitting@benstoutconstruction.com
	Email Address
69633-U HEATED SQ FT	2288 GARAGE SQ FT _721
Electrical Contractor Information	
Description of Work New Install Service Size: 2	00 Amps T-Pole: X Yes No
0 "	
Southern Pride Electric Electrical Contractor's Company Name	919-750-9436 Telephone
370 Slapout Road Wade, NC 28365	
Address	Email Address
24726 License #	
Mechanical/HVAC Contractor Information	
Description of Work New Install	
Certified Heating & Air	
Mechanical Contractor's Company Name	Telephone
P.O. Box 1071 Hope Mills, NC 28348	ehrin.certified@gmail.com
Address	Email Address
20012 H3-C1	
License # Plumbing Contractor Info	rmation
Description of Work New Install	
Titan Plumbing	919-615-1947
Plumbing Contractor's Company Name	Telephone
P.O. Box 1045 Dunn, NC 28335	business@titansplumbing.com
Address	Email Address
34800 License #	
Insulation Contractor Information	
Cumberland Insulation	
Insulation Contractor's Company Name & Address	910-484-7118 Telephone
*NOTE: General Contractor / owner must fill out and sign the second page of this application.	

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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. 01/31/2022 Signature of Owner/Contractor/Officer(s) of Corporation 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 X 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: