## PLUMBING CONTRACTOR CHANGE PLEASE



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>8/29/22</u>
Site Address: 830 Cypress Road	Phone 910-779-0019
Subdivision: Cypress Road	
Description of Proposed Work: NSFD	Total Job Cost \$245,000
General Contractor Information	
Benjamin Stout Real Estate Services, Inc.	910-779-0019
Building Contractor's Company Name	Telephone
PO Box 53798 - Fayetteville, NC 28305	permitting@benstoutconstruction.com
Address	Email Address
69633-U HEATED SQ FT 2527 GARAGE SQ	<b>FT</b> 461
License #	
Description of Work _new install Service Size: 2	200_Amps T-Pole: X_YesNo
•	919-776-5144
JM Pope Electrical Contractor's Company Name	Telephone
	marshallpope74@gmail.com
409 Chatham Street - Sanford, NC 27330 Address	Email Address
21326	
License #	
Mechanical/HVAC Contractor Inform	<u>ation</u>
Description of Work <u>new install/essential air</u>	
Certified Heating & Air	910-858-0000
Mechanical Contractor's Company Name	Telephone
PO Box 1071 - Hope Mills, NC 28348	ehrin.certified@gmail.com
Address	Email Address
20012 H3-C1	
License #  Plumbing Contractor Information	27
Description of Work new install	_# Baths_4
Titan Plumbing Plumbing Contractor's Company Name	919-615-1947 Telephone
PO Box 1045 - Dunn, NC 28335	·
Address	business@titansplumbing.com Email Address
34800	arrow radioo
License #	
Insulation Contractor Information	<u>n</u>
Cumberland Insulation 4205 Clinton Road - Fayetteville, NC	28312 910-484-7118

\*NOTE: General Contractor / owner must fill out and sign the second page of this application.

Telephone

Insulation Contractor's Company Name & Address



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

8/29/22

Date

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Affidavit for Worker's Compensation N.C.G.S. 87-14	
The undersigned applicant being the:	
General Contractor Owner X 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.	
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: Permit Coordinator Date: 8/29/22	