

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 04/10/2023
Site Address: 874 Walker Road, Bunnlevel 28323	Phone 910-779-0019
Subdivision: Walker Road	Lot _1
Description of Proposed Work: New Construction - Single Family Dv	velling Total Job Cost240,000
General Contractor Info	rmation
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_2687 GAR	AGE SQ FT 637
License #	
Electrical Contractor Info	
Description of Work New Install Service	e Size:200_Amps T-Pole: _X_YesNo
Southern Pride Electrical Service	919-750-9436
Electrical Contractor's Company Name	Telephone
370 Slapout Rd. Mt. Olive, NC 28365	southernpride.mp@gmail.com
Address	Email Address
24726	
License #	
Mechanical/HVAC Contractor	rInformation
Description of Work New install / essential air	
	910-858-0000
Description of Work New install / essential air	
Description of Work New install / essential air Certified Heating and Air	910-858-0000
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name	910-858-0000 Telephone
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348	910-858-0000 Telephone ehrin.certified@gmail.com
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License #	910-858-0000 Telephone ehrin.certified@gmail.com Email Address
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info	910-858-0000 Telephone ehrin.certified@gmail.com Email Address
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License #	910-858-0000 Telephone ehrin.certified@gmail.com Email Address
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Description of Work Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info Description of Work New Install	910-858-0000 Telephone ehrin.certified@gmail.com Email Address prmation # Baths 3
Description of Work Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info Description of Work New Install Titans Plumbing	910-858-0000 Telephone ehrin.certified@gmail.com Email Address ormation # Baths 3 919-615-1947
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info Description of Work New Install Titans Plumbing Plumbing Contractor's Company Name	910-858-0000 Telephone ehrin.certified@gmail.com Email Address ormation # Baths 3 919-615-1947 Telephone
Description of Work Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info Description of Work New Install Titans Plumbing Plumbing Contractor's Company Name PO Box 1045, Dunn, NC 28335	910-858-0000 Telephone ehrin.certified@gmail.com Email Address prmation # Baths_3
Description of Work New install / essential air Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info Description of Work New Install Titans Plumbing Plumbing Contractor's Company Name PO Box 1045, Dunn, NC 28335 Address 34800 License #	910-858-0000 Telephone ehrin.certified@gmail.com Email Address prmation # Baths 3 919-615-1947 Telephone business@titansplumbing.com Email Address
Description of Work Certified Heating and Air Mechanical Contractor's Company Name PO Box 1071- Hope Mills, NC 28348 Address 20012 H3-C1 License # Plumbing Contractor Info Description of Work New Install Titans Plumbing Plumbing Contractor's Company Name PO Box 1045, Dunn, NC 28335 Address 34800 License # Insulation Contractor Info	910-858-0000 Telephone ehrin.certified@gmail.com Email Address prmation # Baths 3 919-615-1947 Telephone business@titansplumbing.com Email Address
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*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.

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Hannah McGrath		04/10/2023	3	
Signature of Owner/Contractor/Officer(s) of C	Corporation	Date		
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: Hannah McGrath	Permitting Coor	rdinator Date:	04/10/2023	