



Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

* 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.

Application for Residential Building and Trades Permit

Owner's Name: Sandstone, LLC Date: 3.4.24
Site Address: 521 S. Lincoln St Coats, NC Phone: (919) 878-7685
Subdivision: Peach Orchard Lot: 4
Description of Proposed Work: Shel family home Total Job Cost: ~ 220K

General Contractor Information

Pleasant Builders of NC, LLC Telephone: (919) 878-7685
Building Contractor's Company Name
2201 Sheriff Johnson Rd. Lillington NC 27546 Address
84646 HEATED SQ FT GARAGE SQ FT Email Address: pleasantbuildersnc@gmail.com
License #

Electrical Contractor Information

Description of Work: Maby's Electric Service Size: 200 Amps T-Pole: Yes No
Electrical Contractor's Company Name Telephone: (919) 639-4837
731 Maby Rd. Angier NC Address
150774 27501 Email Address
License #

Mechanical/HVAC Contractor Information

Description of Work: J&M HVAC Telephone: (910) 897-5501
Mechanical Contractor's Company Name
724 Turlington Rd. Dunn, NC Address
17164 28334 Email Address
License #

Plumbing Contractor Information

Description of Work: Double J Plumbing, LLC # Baths: _____ Telephone: (910) 814-7705
Plumbing Contractor's Company Name
614 Byrd Rd. Bunn level, NC Address
21649 28323 Email Address
License #

Insulation Contractor Information

Live Green, Inc Telephone: (919) 427-4079
Insulation Contractor's Company Name & Address

*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.

Carla Benefet / M. Pleasant 3-4-24
 Signature of Owner/Contractor/Officer(s) of Corporation 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 Micelle R. Pleasant, Building Contractor Date: 3-4-24