



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 PermitOwner's Name: Benjamin Stout Real Estate Services Inc. Date 4/29/2025Site Address: 124 Boston River Drive Phone 910-779-0019Subdivision: Ila's Way Lot 6Description of Proposed Work: New Construction - Single Family Dwelling Total Job Cost 212,450**General Contractor Information**Benjamin Stout Real Estate Services Inc. 910-779-0019Building Contractor's Company Name TelephonePO Box 53798, Fayetteville, NC 28305 permitting@benstoutconstruction.comAddress Email Address69633-U **HEATED SQ FT** 1784 **GARAGE SQ FT** 405

License # _____

Electrical Contractor InformationDescription of Work New Install Service Size: 200 Amps T-Pole: X Yes NoJM Pope 919-776-5144Electrical Contractor's Company Name Telephone409 Chatham Street, Sanford NC 27330 marshallpope74@gmail.comAddress Email Address21326

License # _____

Mechanical/HVAC Contractor InformationDescription of Work New install / essential airCertified Heating and Air 910-858-0000Mechanical Contractor's Company Name TelephonePO Box 1071, Hope Mills, NC 28348 ehrin.certified@gmail.comAddress Email Address20012 H3-C1

License # _____

Plumbing Contractor InformationDescription of Work New Install # Baths Dell Haire 910-429-9939Plumbing Contractor's Company Name TelephonePO Box 65048, Fayetteville, NC 28312 vickie.beard@hotmail.comAddress Email Address32886 P-1

License # _____

Insulation Contractor InformationCumberland Insulation - 4205 Clinton Road, Fayetteville, NC 28312 910-484-7118Insulation Contractor's Company Name & Address Telephone***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.

Hannah McGrath
Signature of Owner/Contractor/Officer(s) of Corporation

4/29/2025
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 Coordinator Date: 4/29/2025