

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 4/29/2025
Site Address: 37 Boston River Drive	Phone	910-779-0019
Subdivision:Ila's Way	Lot4	1
Description of Proposed Work: New Construction - Single Family Dwelling	Total Job Cost _	212,450
General Contractor Information	<u>1</u>	
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 1784 GARAGE SC	OFT 405	
License #		
Electrical Contractor Informatio		
	200 Amps T-Po	ole: <u>X</u> YesNo
JM Pope	919-776-5144	
Electrical Contractor's Company Name	Telephone	
409 Chatham Street, Sanford NC 27330	marshallpope74@gmail.com	
Address	Email Address	
21326		
License #		
Mechanical/HVAC Contractor Inform	<u>iation</u>	
Description of Work New install / essential air		
Certified Heating and 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	<u>n</u>	
Description of Work New Install	_# Baths	
Dell Haire	910-429-9939	
Plumbing Contractor's Company Name	Telephone	
PO Box 65048, Fayetteville, NC 28312	vickie.beard@hotmail.com	
Address	Email Address	
32886 P-1		
License #		
Insulation Contractor Informatio	<u>n</u>	
Cumberland Insulation - 4205 Clinton Road, Fayetteville, NC 28312	910-484-7118	
Insulation 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.

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Hannah WcGrath 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 OwnerX 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 WcGrath Permitting Coordinator Date: 4/29/2025