Harnett COUNTY
strong roots • new growth

CentralPermitting@Harnett.org
(910) 893-7525 ext:1
420 McKinney Pkwy (physical)
PO Box 65 (mailing)
Lillington, NC 27546

RESIDENTIAL BUILDING APPLICATION

Site Address: 788 Miller Road Benson NC 27504 **PIN:** 1528-68-8401
Owner: Jacob D. Schlieman Madison D Schlieman **Phone:** 910-514-7878 **Email:** jschlieman15@gmail.com
Description of Proposed Work: Construct Single Family Home. **Total Job Cost:** $749,000.00

GENERAL CONTRACTOR INFORMATION

* Must be owner or licensed contractor. Address, company name & phone must match information on license.

Scott Rhodes Building Inc. — General Contractor's Company Name
919-868-0032 | 919-868-1616 — Phone
PO Box 1188 Benson NC 27504 — Address
Srbinc1616@gmail.com — Email
62421 — License #

ELECTRICAL CONTRACTOR INFORMATION

Description of Work: New Construction - Single Family — Service Size: 400 Amps — T-Pole: YES ☑ NO ☐
Amped Electric LLC — Electrical Contractor's Company Name
919-625-0180 — Phone
510 Denning Rd Benson NC 27504 — Address
ampedelectricnc@yahoo.com — Email
30129 — License #

MECHANICAL/HVAC CONTRACTOR INFORMATION

Description of Work: New Construction - Single Family - Heat pumps
Benson Comfort LLC — Mechanical Contractor's Company Name
910-723-8281 — Phone
5032 NC Hwy 50 S Benson NC 27504 — Address
bensoncomfortnc@gmail.com — Email
35293 — License #

PLUMBING CONTRACTOR INFORMATION

Description of Work: New Construction - Single Family - Rough in + Trim out — # of Fixtures: 17
Jason L. Barefoot — Plumbing Contractor's Company Name
910-892-4736 — Phone
5476 Timothy Rd Dunn NC 28334 — Address
jasonlbarefoot@yahoo.com — Email
20694 — License #

INSULATION CONTRACTOR INFORMATION

Friend's Insulation — Insulation Contractor's Company Name
919-291-2438 — Phone

APPLICATION CONTINUES ON BACK

Harnett COUNTY
NORTH CAROLINA

I hereby certify that I have the authority to complete this application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes and in the Harnett County Zoning Ordinance. I state the information on the aforementioned contractors is correct as it is 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 all changes.

EXPIRED PERMIT FEES - 6 months to 2 years re-issue fee is $150.00. After 2 years re-issue fee is as per current fee schedule.

J. Scott Rhodes
Signature of Owner/Contractor/Officer of Corporation

10/1/25
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

Does hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:

_____ Has 3 or more employees and has obtained workers' compensation insurance to cover them,

_____ Has 1 or more subcontractors and has obtained workers' compensation insurance to cover them,

✓ Has 1 or more subcontractors who has their own policy of workers' compensation insurance covering themselves,

_____ Has no more than 2 employees and no subcontractors,

While working on the project for which this permit is sought and it is understood that the Central Permitting Department issuing the permit may require certificates of workers' compensation insurance coverage from any person, firm, or corporation carrying out the work prior to issuance of the permit or at any time during the permitted work.

J. Scott Rhodes
Signature of Owner/Contractor/Officer of Corporation

10/1/25
Date