



Application # SFD2011-0013

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: MSP Construction & Development, LLC Date: 11/3/10
Site Address: 545 Anderson Creek Dr. Phone: 910-988-6404
Subdivision: Anderson Creek Club Lot: 121
Description of Proposed Work: New Const. Total Job Cost: \$370,000

General Contractor Information

MSP Construction & Development, LLC 910-988-6404
Building Contractor's Company Name Telephone
PO Box 2067 mspconstruction2@gmail.com
Address Email Address
69166 HEATED SQ FT 2716 GARAGE SQ FT 503
License #

Electrical Contractor Information

Description of Work _____ Service Size: 200 Amps T-Pole: Yes ___ No
Richard Electric Inc. 910-991-5490
Electrical Contractor's Company Name Telephone
PO Box 64333 Fayetteville, NC 2830 rbelectric210@yahoo.com
Address Email Address
31424-U
License #

Mechanical/HVAC Contractor Information

Description of Work _____
Carolina Comfort Air, Inc. 919-934-1060
Mechanical Contractor's Company Name Telephone
5212 US 70 B. W Clayton, NC 27520 josh@carolinacomfortair.com
Address Email Address
29077
License #

Plumbing Contractor Information

Description of Work _____ # Baths 3
Doble J Plumbing 910-814-7705
Plumbing Contractor's Company Name Telephone
614 Byrd RD. Bambley, NC 28323 jessiejonesplumbing@gmail.com
Address Email Address
21649
License #

Insulation Contractor Information

Tri-City Insulation & Bl. Products 910-486-8855
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.

[Signature]
Signature of Owner/Contractor/Officer(s) of Corporation

11/03/20
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: [Signature] Date: 11/3/20