

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.hamett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: JSJ Builders Inc	Date _9/22/2021
Site Address: 108 Rainy Beck Way, Erwin 28339	Phone 910 - 438 - 0796
Subdivision: Williams Farm	Lot 26
Description of Proposed Work: New Construction - Single family Dwellin	ng Total Job Cost 123,200
General Contractor Information	
JSJ Builders Inc	910 - 438 - 0796
Building Contractor's Company Name	Telephone
1135 Robeson St., Fayetteville NC, 28305	mcentenojsj@gmail.com
Address	Email Address
55120 HEATED SQ FT 2,240 GARAGE SO	Q FT 435
License #	· · · · · · · · · · · · · · · · · · ·
Description of Work New Construction Service Size:	<u>n</u> 200 Amps T-Pole: <u>X</u> Yes No
Buford Electric Inc	910-818-0994
Electrical Contractor's Company Name	Telephone
948 Pan Dr, Hope Mills, NC 28348	thomasdbuford@yahoo.com
Address	Email Address
31424-U	
License #	
Mechanical/HVAC Contractor Inform	<u>nation</u>
Description of Work New Construction	
Ceritfied Heating and Air	910-858-0000
Mechanical Contractor's Company Name	Telephone
PO BOX 1071, Hope Mills, NC 28348	
Address	Email Address
20012H31	
License # Plumbing Contractor Information	ın
Description of Work New Construction	# Baths 2.5
Titan's Plumbing LLC	(919) 624-4292
Plumbing Contractor's Company Name	Telephone
PO BOX 1045, Dunn, NC 28335	business@titansplumbing.com
Address	Email Address
34800	
License #	
Insulation Contractor Information	
Tri City Insulation, 334 E Mountain Dr, Fayetteville, NC 28306	910-237-8055
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.

9/22/2021

Date

Kevin Shortridge, Vice President

actor/Officer(s) of Corporation

Signature of Owner Con

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: Kevin Shortridge, Vice President Date: 9/22/2021