

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

RESIDENTIAL BUILDING APPLICATION

| Site Address: 179 Baxley Drive, Dunn, NC 28334 | PIN: 1508-61-6816 |
|---|---|
| Owner: JSJ Builders, Inc. Phone: 910-438-079 | Email: tsmithjsj@gmail.com |
| Description of Proposed Work: New Construction | Total Job Cost: \$173,740 |
| GENERAL CONTRACT | OR INFORMATION |
| * Must be owner or licensed contractor. Address, company | |
| JSJ Builders, Inc. | 910-438-0796 |
| General Contractor's Company Name | Phone |
| 1135 Robeson Street, Fayetteville, NC 28305 Address | tsmithjsj@gmail.com Email |
| 55120 | LITER |
| License # | |
| ELECTRICAL CONTRAC | TOR INFORMATION |
| Description of Work: New Construction | Service Size: 200 Amps T-Pole: YES ☑ NO □ |
| MSF Electric, Inc. | 281-494-4700 |
| Electrical Contractor's Company Name | Phone |
| 10455 Fountaingate Drive, Stafford, TX 77477 | mandyk@msfelectric.com |
| Address | Email |
| U.34688 License # | |
| | |
| MECHANICAL/HVAC CONTR | RACTOR INFORMATION |
| Description of Work: New Construction | |
| Carolina Comfort Air | 919-550-7711 |
| Mechanical Contractor's Company Name | Phone |
| PO Box 190, Clayton, NC 27520 | rebecca@carolinacomfortair.com |
| Address | Email |
| 31589 | |
| License # | |
| PLUMBING CONTRACT | OR INFORMATION |
| Description of Work: New Construction | # of Fixtures: |
| Titans Plumbing LLC | 919-624-4292 |
| Plumbing Contractor's Company Name | Phone |
| PO Box 1045, Dunn, NC 28335 | business@titansplumbing.com |
| Address | Email |
| 34800 | |
| License # | |
| INSULATION CONTRAC | TOR INFORMATION |
| Tri City Insulation 334 E. Mountain Dr., Fayetteville, NC 28306 | 910-237-8055 |
| Insulation Contractor's Company Name | Phone |



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 <u>by signing below I have obtained all subcontractors permission to obtain these permits</u> and if <u>any</u> 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.

| Affidavit for Worker's Compensation N.C.G.S. 87-14 | |
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| The undersigned applicant being the: | |
| General Contractor Owner Officer/Agent of t | the Contractor or Owner |
| Does hereby confirm under penalties of perjury that the person(s), firm(s) of permit: | or corporation(s) performing the work set forth in the |
| Has 3 or more employees and has obtained workers' compensation | n insurance to cover them, |
| Has 1 or more subcontractors and has obtained workers' compensation | ation 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 unders the permit may require certificates of workers' compensation insurance cov out the work prior to issuance of the permit or at any time during the permit | verage from any person, firm, or corporation carrying |
| Signature of Owner/Confractor/Officer-of Cornoration | 11/5/2025 Date |