

strong roots $\boldsymbol{\cdot}$ 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: 19 Boston River Drive, Dunn, NC 28334		PIN: _	1508-41-9419
Owner: JSJ Builders, Inc.	Phone: 910-438-0796	Email: _	tsmithjsj@gmail.com
Description of Proposed Work: New	Construction		Total Job Cost: \$173,740
GENERAL CONTRACTOR INFORMATION			
* Must be owner or license	ed contractor. Address, company name	& phone must ma	atch information on license.
JSJ Builders, Inc.		910-438-079	96
General Contractor's Company Name		Phone	
1135 Robeson Street, Fayetteville, NC 28305		tsmithjsj@gmail.com	
Address		Email	
55120 License #			
ELECTRICAL CONTRACTOR INFORMATION			
Description of Work: New Construction		Service Size: _	200 Amps T-Pole: YES ☑ NO □
MSF Electric, Inc.		281-494-470	00
Electrical Contractor's Company Name	V	Phone	
10455 Fountaingate Drive, Stafford, TX	77477	mandyk@ms	sfelectric.com
Address		Email	
U.34688			
License #			
MEC	HANICAL/HVAC CONTRACT	<u>OR INFORMA</u>	<u>TION</u>
Description of Work: New Construction	11° 11° 11°	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Carolina Comfort Air		919-550-771	1
Mechanical Contractor's Company Name	-	Phone	
PO Box 190, Clayton, NC 27520			rolinacomfortair.com
Address		Email	
31589			
License #			
	PLUMBING CONTRACTOR IN	NFORMATION N	[
Description of Work: New Construction			# of Fixtures:
Titans Plumbing LLC		919-624-429	2
Plumbing Contractor's Company Name		Phone	
PO Box 1045, Dunn, NC 28335		business@titansplumbing.com	
Address		Email	
34800			
License #			
INSULATION CONTRACTOR INFORMATION			
Tri City Insulation 334 E. Mountain Dr., Fay	etteville, NC 28306	910-237-805	5
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.

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. 11/5/2025 Signature of Owner/Contractor/Officer of Corporation 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.

> 11/5/2025 Date