

Application # _____

* 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. Harnett County Central Permitting
PO Box 65 Lillington, NC 27546
910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Robert Nelson			Date:
Site Address: 10110 Nc 27 W	Phone:	910-987-7473	
Description of Proposed Work:	install 9 smartjacks & 48ft of steel beam to help suppot floors	Total Job Cost:	
	General Contractor Information	to all recommendation of the second	
Southeast Foudation Repa	910-299-019	8	
Building Contractor's Company I		Telephone	-
709 1/2 Southwest Blvd Cl	inton Nc	amandap.sef	r@gmail.com
Address		Email Address	
NA	HEATED SQ FT GARAGE SO	QFT	
License #	9-39 - 59/55 - 59/55		
Description of Work	<u>Electrical Contractor Informatio</u> Service Size:	<u>n</u>	ale. Ves Ne
	Service Size.	Allips 1-P	ole1 esNo
Electrical Contractor's Company	Name	Telephone	
	a dame	relephone	
Address		Email Address	
		Email Address	
License #			
	Mechanical/HVAC Contractor Inform	<u>nation</u>	
Description of Work			_
Mechanical Contractor's Compa	Telephone		
Address		Email Address	
8			
License #			
	Plumbing Contractor Informatio	<u>n</u>	
Description of Work		_# Baths	
		·	
Plumbing Contractor's Company	Name	Telephone	
A.1.		7	
Address		Email Address	
License #			
LIGG1195 #	Insulation Contractor Informatio	on.	
		 (
Insulation Contractor's Company	V 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.				
George Herring Signature of Owner/Contractor/Officer(s) of Corporation 02/23/21 Date				
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
X 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:				
X 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: General Manager Date: 02/23/21				

GENERAL REQUIREMENTS

REFER TO SUBSEQUENT PLAN AND DETAIL NOTES FOR VARIATIONS AND REQUIREMENTS SPECIFIC TO REFERENCED PROJECT.

NOTES ON DRAWINGS TAKE PRECEDENCE OVER GENERAL STRUCTURAL NOTES.

DESIGN CRITERIA

BUILDING CODE CONFORMANCE (MEETS OR EXCEEDS REQUIREMENTS):
2015 INTERNATIONAL BUILDING CODE (IBC)
2015 INTERNATIONAL RESIDENTIAL CODE (ICBC)
2018 NORTH CAROLINA BUILDING CODE (NCBC)
2018 NORTH CAROLINA RESIDENTIAL CODE (NCRC)

DEAD LOADS: FLOOR DEAD LOAD INTERIOR WOOD WALL DEAD LOAD

15 PSF 9 PSF

FLOOR LIVE LOAD (RESIDENTIAL) 40 PSF

LIVE LOAD DEFLECTION LIMIT DEFLECTIONS:
TOTAL LOAD DEFLECTION LIMIT L/240 L/360

REFERENCE STANDARDS:
CONFORM TO IBC CHAPTER 18 "SOILS & FOUNDATIONS"

ALLOWABLE FOUNDATION PRESSURE (ASSUMED) DESIGN SOIL VALUES: 1500 PSF

	FSI SMARTJACK SYSTEM INFO	Z		
PART	DESCRIPTION	COMMENTS	MIN YIELD MIN TENSILE STRESS, F, STRESS, F,	MIN YIELD MIN TENSILE STRESS, F. STRESS, F.
SJQ350T	ASTM A500 GRADE C HD GALV, PER ASTM 123, HSS $3^1/_2 \times 0.095" x^1 L$ SQUARE TUBE		50 KSI	62 KSI
S4x7.7	ASTM A992 STEEL S SHAPE BEAM (L=120" & 144" - FIELD CUT TO (N) STEEL LENGTH)	(N) STEEL BEAM	50 KSI	65 KSI
SJ350TP	ASTM A36 $\mathbb{R}^3/_6 \times 4^1/_2 \times 0^{1-4^3}/_2^*$ ASTM A53 GRADE B $1^3/_4^* \times 4^1/_4^* \times 1.38^*$ L CONFINING RING	WOOD BEAM CONDITION	36 KSI	58 KSI
SJQ125ATR	ASTM A108 GRADE 1018 1^{1} 4 4 9 4 0 $^{-}$ 10 8 L THREADED ROD W/ WELDED HEAVY HEX NUT		54 KSI	64 KSI
		200		



VICINITY MAP

NOTE: INSTALL PER MFR RECOMMENDATIONS

ASTM A572 GRADE 50 \$\frac{9}{4}\pi_3.63\pi0'-3.63" W/ 11/4"\pi THREAD TAP

ASTM A36 BENT P.O.120"

SJTBTS4

A108 1/2"9X51/3" BOLTS W/ NUTS (ASTM A307 MIN) &ASTM A53 GRADE B 13/4"9X 1/41.38"L CONFINING RING (AT BEAM SPLICE & END LOCATIONS)

ASTM A36 ${
m R}^3/_8{ imes}^4{}^1/_2{ imes}^0{}^-5$ " TOP BEAM SPLICE BRACKET W/ (4) ASTM

SJ350TBBS4

ASTM A36 ${\rm R}^3/_{\rm B}{\rm xd}^{1}/_{\rm 2}{\rm x0}^{1}$ –5" BOTT BEAM SPLICE BRACKET (AT BEAM SPLICE & END LOCATIONS)

STEEL BEAM CONDITION

36 KSI

58

3

36 KSI MIN

60 KSI MIN

35 KSI 36 KSI

60 KSI 58 KSI

S S

58 65

S S

SJ350TPS4

ASTM A36 BENT $f_{\rm c}^2 V_{16} x_3 x_0' - 6^x$ ASTM A53 GRADE B $1^3 V_a'' v_1 v_1 J_a'' x_1 J_b'' L CONFINING RING INTERMEDIATE LOCATIONS)$

SJQ350BP-A

ASTM A36 &5/16×12×1'-0" ASTM A36 BENT &0.120"

CRUSHED STONE FTG PER PLAN

36 KSI

58

S S

36 KS

58 KSI



SNOISIVE

GENERAL NOTES

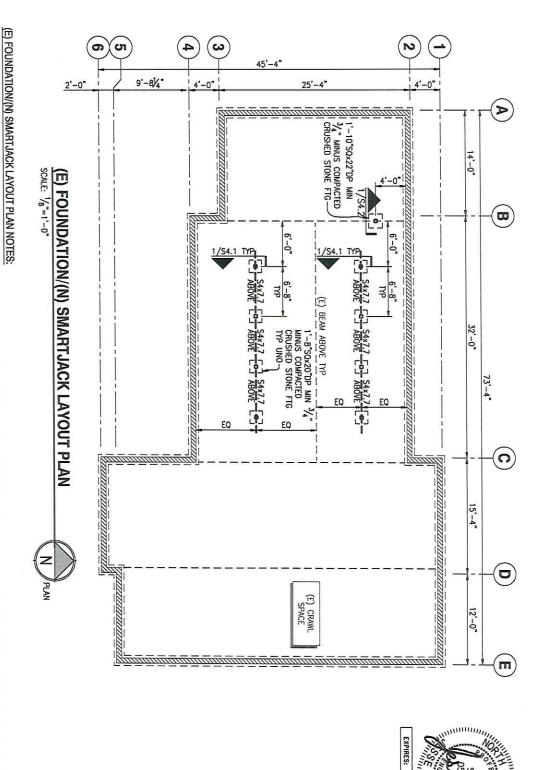
SHEET NO.	PROJECT NO: SE21-057 DESIGNED BY: JN DRAWN BY: JN CHECKED BY: CVR, JLD DATE: 02-22-2021

NELSON RESIDENCE FLOOR SUPPORT 10110 NC-27 LILLINGTON, NC 27546



EXPIRES:

12/31/21



SHEET NO.

PROJECT NO: SE21-057 DESIGNED BY: JN DRAWN BY: CHECKED BY: CVR, JLD DATE: 02-22-2021

EVISIONS

REPLACE "IN-KIND" ALL (E) WOOD MEMBERS (JOISTS, PURLINS, SUBPURLINS, SHEATHING, STUDS, WALL PLATES) WHICH SHOW SIGNS OF DRY ROT OR STRUCTURAL DAMAGE

ALL CONSTRUCTION MATERIALS ON PLANS, ELEVATIONS & DETAILS ARE (N) UNO

CONTRACTOR TO NOTIFY ENGINEER OF RECORD OF DISCREPANCIES BETWEEN FIELD CONDITIONS & THOSE SHOWN IN THESE DOCUMENTS PRIOR TO WORK TYP

INDICATES (E) CMU STEMWALL ON (E) CONC FOOTING

SECTION CUT - DETAIL NUMBER/SHEET NUMBER

ALL FASTENERS AND HARDWARE IN CONTACT W/ PT WOOD, CONCRETE OR MASONRY SHALL BE HOT-DIPPED ZINC-COATED GALYANIZED STEEL OR STAINLESS STEEL

SMARTJACK SPACING SHALL BE AS INDICATED ON PLAN (6'-8" OC MAX) UNO

x/sx.x

REFERENCE S1.1 FOR GENERAL REQUIREMENTS

0

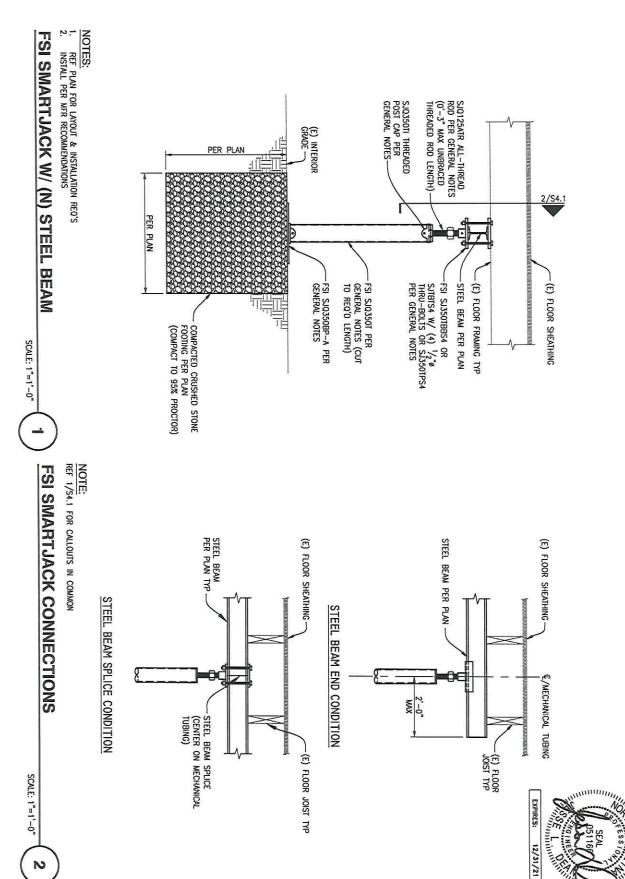
INDICATES LOCATION OF FSI SJQ350 SMARTJACK ((9) TOTAL)

• MAX LOAD TO SMARTJACK = 4,224 LBS

NELSON RESIDENCE
FLOOR SUPPORT
10110 NC-27
LILLINGTON, NC 27546

A Commy Group, the Proof of Horses Collision washing

12/31/21



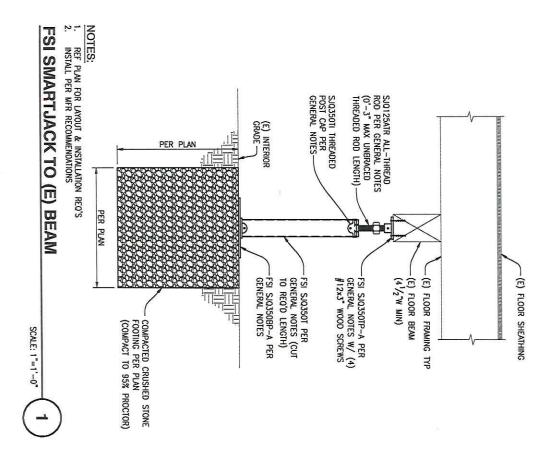
SHEET NO: \$4

N

DRAWN BY: JN CHECKED BY: CVR, JLD DATE: 02-22-2021 PROJECT NO: SE21-057 DESIGNED BY: JN

REVISIONS SMARTJACK DETAILS **NELSON RESIDENCE** FLOOR SUPPORT 10110 NC-27 LILLINGTON, NC 27546





SEAL DS 116

SHEET NO.

PROJECT NO: SE21-057 DESIGNED BY: JN DRAWN BY: JN CHECKED BY: CYR, JLD DATE: 02-22-2021

SMARTJACK DETAILS

REVISIONS

NELSON RESIDENCE FLOOR SUPPORT 10110 NC-27 LILLINGTON, NC 27546

