

App# 06-50016302

Application for Building and Trade Permit

Owner's Name: **H&H Constructors, Inc.** Date: 2.06.07
Address: **2919 Breezewood Ave., Ste. 400 Fayetteville, NC 28303** Phone: **910-486-4864**
Directions to job site: _____

Subdivision: **FOREST OAKS** Lot: 105
Type Construction: (Please Check)
New (x) Renovation () Addition () Building Use: (Please Check)
Moved House () Other () Residential (x) Modular ()
Commercial () Multi-Family ()
Description of Proposed Work: _____
Total Project Cost: _____

Building Permit Information

Heated 1923 Crawl Space () Building Construction Cost \$ _____
Unheated 719 Slab () Acres Disturbed 0.41 Stories 1
H&H CONSTRUCTORS, INC. 2929 BREEZEWOOD AVE., STE. 200 FAYETTEVILLE, NC 28303
Building Contractor's Company Name Address
D. Ralph Huff III **31554** **910-486-4864**
Signature of Officer(s) of Corporation License # Telephone

Electrical Permit Information

Description of Work _____ Electrical Cost \$ _____
TS Pole: Yes () No () Underground () Overhead ()
Permanent Service: Underground () Overhead () Service Size: _____ Amps
SANDY RIDGE ELECTRIC INC. 454 WHITEHEAD RD., FAYETTEVILLE, NC 28301
Electrical Contractor's Company Name Address
Carl Kline **10006U** **910-323-2458**
Signature of Officer (s) of Corporation License # Telephone

Insulation Permit Information

Residential () Other () Not Required ()
TRICITY INSULATION, INC. 418 PERSON ST., FAYETTEVILLE, NC 28301
Insulation Contractor's Company Name Address
[Signature] **200000041733** **910-486-8855**
Signature of Officer (s) of Corporation License # Telephone

Mechanical Permit Information

Description of Work _____ Number of Units _____ Type System HP Mechanical Cost \$ _____
Cooper Mechanical, Inc. PO Box 1068 Sanford, NC 27331-1068
Mechanical Contractor's Company Name Address
[Signature] **2680** **919-776-7537**
Signature of Officer(s) of Corporation License # Telephone

Plumbing Permit Information

Description of Work _____ Number of Baths _____ Plumbing Cost \$ _____
JB Plumbing Contracting, Inc. 1824 Owen Dr. #309 Fayetteville, NC 28304
Plumbing Contractor's Company Name Address
[Signature] **18945 P1** **910-426-5272**
Signature of Officer(s) of Corporation License # Telephone

Affidavit of Worker's Compensation Coverage
N.C.G.S. 87-14

The undersigned applicant for Building Permit # _____ being the

 X 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/have three (3) or more employees and has/have obtained workers' compensation insurance to cover them.

_____ has/have one or more subcontractor(s) and has/have obtained workers' compensation insurance covering them.

 X has/have one or more subcontractor(s) who has/have their own policy of workmen's compensation covering themselves.

 X has/have not 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 workers' 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.

Firm name: H H Constructors, Inc.

By: D. Ralph Huff, III

Title: Owner - President Contractor

Date: 3-06-07

Plan Box Number AA-13

Job Name H. + H. Const

Date: 3-14-07

Required Inspections for SFA/SFD

Appl. # 0650016302

Valuation \$159,506

Sq. Feet 2455

Sequence

10	<input checked="" type="checkbox"/>	R* Bldg. Footing
10-30	<input checked="" type="checkbox"/>	R* Elec. Temp Service Pole
20	<input checked="" type="checkbox"/>	R* Building Foundation
20	<input checked="" type="checkbox"/>	Address Confirmation
30-999		Open Floor
30-999	<input checked="" type="checkbox"/>	R* Bldg. Slab Insp.
30-999		R* Elec. Under Slab
30-999	<input checked="" type="checkbox"/>	R*Plumb. Under Slab
40	<input checked="" type="checkbox"/>	Four Trade Rough In
40		Four Trade Rough In > 2500
40		Three Trade Rough In
40		Three Trade Rough In > 2500
40		Two Trade Rough In
40		Two Trade Rough In > 2500
40		One Trade Rough In
40		One Trade Rough In > 2500
50	<input checked="" type="checkbox"/>	R* Insulation
60	<input checked="" type="checkbox"/>	Four Trade Final
60		Four Trade Final > 2500
60		Three Trade Final
60		Three Trade Final > 2500
60		Two Trade Final
60		Two Trade Final > 2500
60		One Trade Final
60		One Trade Final > 2500
999	<input checked="" type="checkbox"/>	Envir. Operations Permit

**County Health Department
Application for
Improvement Permit and/or Authorization to Construct**

Improvement Permit

Authorization to Construct

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (complete site plan = 60 months; complete plat = without expiration)

APPLICANT INFORMATION

H+H Constructors, Inc. 2919 Breezewood Ave. Ste. 400 910.486.4864
 Applicant Fayetteville, NC 28303 Home & Work Phone
Same Same Same
 Owner Address Home & Work Phone

PROPERTY INFORMATION

21 Basket Oak Dr. Forest Oaks PH 1+2/Lot 105
 Street Address Subdivision Name Section/Phase/Lot#
 Directions to Site: Hwy 27W to Nursery Rd (SR1117); Lot Size 0.41 AC
Turn left on Nursery Rd, left on Lemuel Block Rd (SR1125),
left on Valley Oak into Forest Oaks Subdivision.

DEVELOPMENT INFORMATION

- New Single Family Residence
- Expansion of Existing System
- Repair to Malfunctioning Sewage Disposal System
- Non-Residential Type of Structure

Residential Specifications

Maximum number of bedrooms: 4
 If expansion: Current number of bedrooms: N/A
 Will there be a basement? yes no
 Plumbing fixtures in Basement yes no

Non-Residential Specifications:

N/A Type of business: _____ Total Square footage of Building: _____
 Maximum number of employees: _____ Maximum number of seats: _____

Water Supply:

Are there any existing wells, springs, or existing waterlines on this property? yes no

- New well
- Existing Well
- Community Well
- Public Water
- Spring

If applying for Authorization to Construct: Please Indicate Desired System Type(s):
 (systems can be ranked in order of your preference)

- Accepted
- Alternative
- Conventional
- Innovative
- Other _____
- Any

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation.

- yes no Does the site contain any jurisdictional wetlands?
- yes no Does the site contain any existing wastewater systems?
- yes no Is any wastewater going to be generated on the site other than domestic sewage?
- yes no Is the site subject to approval by any other public agency?
- yes no Are there any easements or right of ways on this property?

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

D. Ralph Huff
 Property owner's or owner's legal representative's signature (required)

11-28-06
 Date

