

Initial Application Date: 10/30/19

Application # 51	D1910	-0021
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Central Permitting 108 E	COUNTY OF HARNETT Front Street, Lillington, NC 27546	Phone: (910) 893-7525 ext:2 Fa	ION x: (910) 893-2793 www.harnett.org/permits
A RECORDED SURVEY MA	AP, RECORDED DEED (OR OFFER TO F	PURCHASE) & SITE PLAN ARE REQUIRED WI	HEN SUBMITTING A LAND USE APPLICATION
LANDOWNER: H & H Const	ructors of Fayetteville, L	LC Mailing Address: 2919 Bree	zewood Avenue, Suite 400
			Email: stacysimmons@hhhomes.com
APPLICANT*:	Mailing /	Address;	
City:*Please fill out applicant information if d	State: Zip: Zip:	Contact No:	Email:
ADDRESS: OF WWA POR DEED OR OTP: 2668;	nt Drive - Was	dshire PIN: 0506-9	7-5119
		ent(w/wo bath): Garage: Deck	
		ent (w/wo bath) Garage: Site I	Built Deck: On Frame Off Frame
Manufactured Home: SW	DW TW (Size x) # Bedrooms: Garage:(site built? Deck: site built?
	No. Buildings: N	o. Bedrooms Per Unit:	_
Home Occupation: # Rooms:	Use:	Hours of Operation:	#Employees:
Addition/Accessory/Other: (S	izex) Use:		Closets in addition? () yes () no
Sewage Supply: New Septition (Complete Enviror Does owner of this tract of land, or	Tank Expansion Reloc mental Health Checklist on other s	complete New Well Application at the scationExisting Septic TankCide of application if Septic) ed home within five hundred feet (500')	Must have operable water before final ame time as New Tank) county Sewer of tract listed above? () yes () no
Structures (existing or proposed):	Single family dwellings: Propos	ed Manufactured Homes:	Other (specify):
If permits are granted I agree to co	onform to all ordinances and laws of ments are accorate and correct to t lighature of Owner or Owner's A ponsibility to provide the county	of the State of North Carolina regulating the best of my knowledge. Permit subject the best of my knowledge. Permit sub	such work and the specifications of plans submitted. It to revocation if false information is provided. Date In the subject property, including but not limited
to: boundary information, h	ouse location, underground or o incorrect or missing informa This application expires 6 month	overhead easements, etc. The county ution that is contained within these ap is from the initial date if permits have N CONTINUES ON BACK	or its employees are not responsible for any plications.***

strong roots • new growth



Application # SFU 10110 - 0051

* Each section below to be filled out by whomever performing work. Must be owner 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: H&H Constructors of Fayetteville, LLC.	Date: 10/30/19
Site Address: 607 Wood Point Drive	Phone: 910-486-4864
Subdivision: Woodshire	Lot: 401
Description of Proposed Work: New Single Family Residentia	
General Contractor Inf	
H&H Constructors of Fayetteville, LLC.	910-486-4864 Ext. 450
Building Contractor's Company Name	Telephone
2919 Breezewood Ave. Ste. 400 Fayetteville, NC 28303	Stacysimmons@hhhomes.com
Address	Email Address
74158	
License #	
Electrical Contractor In	
	ice Size: 200 Amps T-Pole: Yes N
JM Pope Electric, Inc.	919-776-5144
Electrical Contractor's Company Name	Telephone
409 Chatham Street Sanford, NC 27330	Electricpope@windstream.net
Address	Email Address
21326	
License # Mechanical/HVAC Contract	or Information
Description of Work Single Family HVAC	or information
Carolina comfort Air, Inc.	910-891-1239
Mechanical Contractor's Company Name	
703 N. Clinton Ave. Dunn, NC 28334	Telephone
Address	Carolinacomfortair@yahoo.com Email Address
32825	Email Address
License #	
Plumbing Contractor In	formation
Description of Work Single Family Plumbing	# Baths 2.5
Double J Plumbing, LLC	910-814-7705
Plumbing Contractor's Company Name	Telephone
614 Byrd Rd., Bunnlevel, NC 28323	jamiejohnsonplumbing@gmail.c
Address	Email Address
21649	
License #	
Insulation Contractor In	formation
Tricity Insulation Inc. 418 Person St. Fay. NC 28301	910-486-8855
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 \$e per current fee schedule.

Signature of Owner/Contractor/Officer(s) of Corporation

[0]30[9]

Date

Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:
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
Sign w/Title: Stury White Office Offi