

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Initial Application Date:

Application # _	SFO	6119	6100-
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Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION**
LANDOWNER: H&H Constructors of Fayetteville, LLC. Mailing Address: 2919 Breezewood Ave. Ste. 400
City: Fayetteville State: NC Zip: 28303 Contact No: 910-486-4864 Email: Stacysimmons@hhhomes.com
City:State:Contact No
APPLICANT*: Same As Above Mailing Address: Same As Above
City: Fayetteville State: NC Zip: 28303 Contact No: 910-486-4864 Email: Stacysimmons@hhhomes.com
ADDRESS: 37 Artillery (ave PIN: 9595-41-0891
ADDRESS: 37 Actillary law. PIN: 9595-41-0891
DEED OR OTP: 3366; 756
PROPOSED USE:  SFD: (Size 50 x 31) # Bedrooms: 5 # Baths: 3 Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Deck: Slab:
(Is the bonus room finished? ( ) yes ( ) no w/ a closet? ( ) yes ( ) no (if yes add in with # bedrooms)
Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame
(Is the second floor finished? ( ) yes ( ) no Any other site built additions? ( ) yes ( ) no
Manufactured Home: SW DW TW (Size x ) # Bedrooms: Garage: site built? Deck: site built?
Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit:
Home Occupation: # Rooms: Use: Hours of Operation: #Employees:
Addition/Accessory/Other: (Sizex) Use: Closets in addition? ( ) yes ( ) no
Water Supply: County Existing Well New Well (# of dwellings using well ) *Must have operable water before final
(Need to Complete New Well Application at the same time as New Tank)  Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)  Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes
Does the property contain any easements whether underground or overhead () yes () no
Structures (existing or proposed): Single family dwellings: Proposed Manufactured Homes: Other (specify):
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.
Signature of Owner or Owner's Agent  ***It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.***
incorrect of missing information that is contained within these applications.

strong roots · new growth

\*This application expires 6 months from the initial date if permits have not been issued\*\*
APPLICATION CONTINUES ON BACK



Application # \_\_\_\_\_

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

\* 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.

## Application for Residential Building and Trades Permit

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Owner's Name: H&H Constructors of Fayetteville, LLC.	Date: [1] [1] [9
	Phone: 910-486-486
Subdivision: Manor @ Lexington Plantation	Lot:752
Description of Proposed Work: New Single Family Residential	
General Contractor Information	on
H&H Constructors of Fayetteville, LLC.	910-486-4864
Building Contractor's Company Name	Telephone
2919 Breezewood Ave. Ste. 400 Fayetteville, NC 28303	Stacysimmons@hhhomes.com
Address	Email Address
74158	
License #	
Description of Work Single Family Electric Service Size	on : <u>200                                   </u>
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 #	20
Mechanical/HVAC Contractor Infor	<u>mation</u>
Description of Work Single Family HVAC	
Carolina comfort Air, Inc.	910-891-1239
Mechanical Contractor's Company Name	Telephone
703 N. Clinton Ave. Dunn, NC 28334	Carolinacomfortair@yahoo.com
Address	Email Address
32825	
License # Plumbing Contractor Informati	on
Description of Work Single Family Plumbing	# <sub>Baths</sub> 3
Description of Work Single Falling Flaming	
Plumbing Contractor's Company Name	910-814-7705 Telephone
614 Byrd Rd. Punilard NC 28323	relephone
Address	Email Address
21049	Email Addicas
License #	
Insulation Contractor Informati	<u>on</u>
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 <a href="by-signing-below-I have obtained all subcontractors">by-signing-below I have obtained all subcontractors</a> permission to obtain these permits and if <a href="mailto:any">any</a> 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.

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

carrying out the work.

Affidavit for Worker's Compensation N.C.G.S. 87-14
The undersigned applicant being the:
General Contractor Owner 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

Office Coordinator Date: 11