

Initial Application Date: 6-18-2020

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

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 FAY.LLC Mailing Address: 2919 BREEZEWOOD AVE. STE. 400
City: FAYETTEVILLE State: NC Zip: 28303 Contact No: 910-486-4864 Email: stacysimmons@hhhom

APPLICANT*: Same as Above Mailing Address: Same as Above
City: _____ State: _____ Zip: _____ Contact No: _____ Email: _____

*Please fill out applicant information if different than landowner
ADDRESS: 28 York Court Lot 75 PIN: 0514-35-0592

Zoning: _____ Flood: _____ Watershed: _____ Deed Book / Page: _____

Setbacks - Front: 16.0 Back: 85.8 Side: 26.0 Corner: _____

PROPOSED USE:

- SFD: (Size 28 x 32) # Bedrooms: 3 # Baths: 2.5 Basement(w/wo bath): _____ Garage: 280 Deck: _____ Crawl Space: _____ Slab: _____ Slab: _____ Monolithic
Mod: (Size _____ x _____) # Bedrooms _____ # Baths _____ Basement (w/wo bath) _____ Garage: _____ Site Built Deck: _____ On Frame _____ Off Frame _____
Manufactured Home: _____ SW _____ DW _____ TW (Size _____ x _____) # Bedrooms: _____ Garage: _____ (site built? _____) Deck: _____ (site built? _____)
Duplex: (Size _____ x _____) No. Buildings: _____ No. Bedrooms Per Unit: _____
Home Occupation: # Rooms: _____ Use: _____ Hours of Operation: _____ #Employees: _____
Addition/Accessory/Other: (Size _____ x _____) Use: _____ Closets in addition? () yes () no

Water Supply: [X] 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 [X] 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 (X) no

Does the property contain any easements whether underground or overhead () yes (X) no

Structures (existing or proposed): Single family dwellings: [X] _____ 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

Date 6-18-2020

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.

*This application expires 6 months from the initial date if permits have not been issued**

APPLICATION CONTINUES ON BACK

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

* 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.

Owner's Name: H&H CONSTRUCTORS OF FAYETTEVILLE, LLC Date: 6-18-2020
 Site Address: 28 York Court Phone: 910-486-4864
 Subdivision: COUNTRY SQUIRE ESTATES Lot: 75
 Description of Proposed Work: NEW SINGLE FAMILY RESIDENTIAL

General Contractor Information

H&H CONSTRUCTORS OF FAYETTEVILLE, LLC 910-486-4864
 Building Contractor's Company Name Telephone
2919 BREEZEWOOD AVE. STE 400 FAY. NC 28303 stacysimmons@hhhomes.com
 Address Email Address
74158
 License #

Electrical Contractor Information

Description of Work SINGLE FAMILY ELECTRIC Service Size: 200 Amps T-Pole: Yes No
JM POPE ELECTRIC, INC. 919-776-5144
 Electrical Contractor's Company Name Telephone
409 CHATHAM ST. SANFORD, NC 27330 electricpope@windstream.net
 Address Email Address
21326
 License #

Mechanical/HVAC Contractor Information

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
29077 H-3-1
 License #

Plumbing Contractor Information

Description of Work SINGLE FAMILY PLUMBING # Baths: 2.5
VANCE JOHNSON PLUMBING 910-424-6712
 Plumbing Contractor's Company Name Telephone
3242 MIDPINE RD. FAY. NC 28306
 Address Email Address
7756-PL
 License #

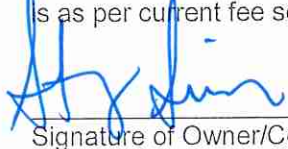
Insulation Contractor Information

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 as per current fee schedule.



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

6-18-2020

Date

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

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.

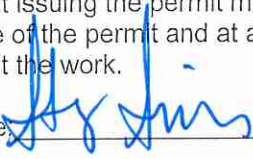
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.

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 carrying out the work.

Sign w/Title



/Office Coordinator

Date: 6-18-2020

Truss/Rafter to Wood Double Top Plates

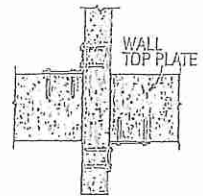


Model No.	Qty Req'd	Fasteners		DF/SP Allowable Loads				SPF Allowable Loads			
		To Rafters	To Plates	Uplift		Parallel to Plate (F ₁) (133/160)	Perp. to Plate (F ₂) (133/160)	Uplift		Parallel to Plate (F ₁) (133/160)	Perp. to Plate (F ₂) (133/160)
				(133)	(160)			(133)	(160)		
H2.5	1	5-8d	5-8d	415	415	150	150	365	365	130	130
H5A	1	3-8d	3-8d	350	420	115	180	245	245	100	120
HGA10	1	4-SDS½x1½	4-SDS½x3	435	435	1165	940	375	375	870	815
H5	1	4-8d	4-8d	455	465	115	200	265	265	100	170
H1	1	6-8dx1½	4-8d	490	585	485	165	400	400	415	140
H2.5A	1	5-8d	5-8d	600	600	110	110	520	535	110	110
LTS12	1	6-10dx1½	6-10dx1½	720	720	75	125	620	620	75	125
H8	1	5-10dx1½	5-10dx1½	620	745	—	—	530	565	—	—
H10-2	1	6-10d	6-10d	760	760	455	395	655	655	390	340
H2.5	2	10-8d	10-8d	830	830	300	300	730	730	260	260
H5	2	8-8d	8-8d	910	930	230	400	530	530	200	340
H10	1	8-8dx1½	8-8dx1½	905	990	585	525	780	850	505	450
MTS12	1	7-10dx1½	7-10dx1½	840	1000	75	125	730	860	75	125
H1	2	12-8dx1½	8-8d	980	1170	970	330	800	800	830	280
H2.5A	2	10-8d	10-8d	1200	1200	220	220	1040	1070	220	220
LTS12	2	12-10dx1½	12-10dx1½	1440	1440	150	250	1240	1240	150	250
HTS20	1	12-10dx1½	12-10dx1½	1450	1450	75	125	1245	1245	75	125
H16S	1	2-10dx1½	10-10dx1½	1470	1470	—	—	1265	1265	—	—
H16	1	2-10dx1½	10-10dx1½	1470	1470	—	—	1265	1265	—	—
H10	2	16-8dx1½	16-8dx1½	1810	1980	1170	1050	1560	1700	1010	900
MTS12	2	14-10dx1½	14-10dx1½	1680	2000	150	250	1460	1720	150	250

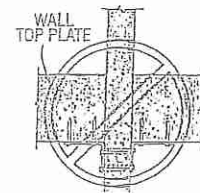
1. "—" in the tables indicates that the product has not been tested in the particular load direction listed.
2. For connections to single top plates, see page 12.
3. Fasten multiple members together to act as a single unit.

D7

Hurricane Tie installations to Achieve Twice the Load (Top View)



Install diagonally across from each other for minimum 2x truss.



Nailing into both sides of a single ply 2x truss may cause the wood to split. A minimum rafter thickness of 2½" must be used when connectors are installed on the same side.

