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

Application for Residential Building and Trades Permit

Owner's Name: H&H Constructors of Fayetteville, LLC.	Date: 1/22/2020
Site Address: 537 Falls Creck Drive	Phone: <u>910-486-4864</u>
Directions to job site from Lillington: Hwy 27 to Nursery Road, Turn lef	t, follow to Ray Road, turn left and
follow to Anderson Creek Drive.	
Subdivision: Anderson Creek Crossing	Lot:99
Description of Proposed Work: SFD	# of Bedrooms:
Heated SF: 198 Unheated SF: 637 Finished Bonus Room?	Crawl Space: Slab: n
H&H Constructors of Fayetteville, LLC. Building Contractor's Company Name	<u>910-486-4864</u> Telephone
2919 Breezewood Avenue Ste.400,Fay, NC 28303 Address	stacysimmons@hhhomes.com Email Address
74158 License #	
Description of Work Residential Service Size: 200	<u>on</u> Amps T-Pole: <u>X</u> Yes <u>N</u> o
	919-776-5144 Telephone
409 Chatham Street Sanford, NC 27330 Address	electricpope@windstream.net.com Email Address
21326 License #	
Mechanical/HVAC Contractor Inform	nation
Description of Work Residential	
Carolina Comfort Air,Inc. Mechanical Contractor's Company Name	<u>919-934-1060</u> Telephone
5212 US Hwy 70 Business, Clayton, NC 27520 Address	<u>carolinacomfortair@yahoo.com</u> Email Address
29077 License #	
Plumbing Contractor Information	0 5
Description of Work Residential # Bati	
Vance Johnson Plumbing Co., Inc. Plumbing Contractor's Company Name	910-424-6712 Telephone
3242 Mid Pine Dr. Fayetteville, NC 28306 Address	etoepfer@vjplumbing.com Email Address
07756-P-I	
License # Insulation Contractor Information	no
Tri-City Insulation 418 Person St. Fay. NC 28301	910-486-885 <u>5</u>
Insulation Contractor's Company Name & Address	Telephone

^{*}NOTE: General Contractor I 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 bysigning 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.

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Ar din	7/22/2020
ALL V MVV	12220
Signature of Owner/Contractor/Officer(s) of Cornoration	Date

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 permittand at any time during the permitted work from any person, firm or corporation carrying out the work.
Sign w/Title Date: 1/22/2020



Initial Application Date: 7/22/2020

0 (COUNTY	
1	NORTH CAROLINA	
		Application #

				CU#	
Central Permitting	COUNTY OF 108 E. Front Street, Lillington		AL LAND USE APPLICATION 910) 893-7525 ext:2 Fax:		w.harnett.org/permits
A RECORDED SU	RVEY MAP, RECORDED DEED (OF	R OFFER TO PURCHASE) & S	SITE PLAN ARE REQUIRED WHEN	N SUBMITTING A LAND U	SE APPLICATION
LANDOWNER: H&H C	onstructors of Fayett	eville, LLC. Mailing	Address: 2919 Breeze	ewood Ave. Ste	. 400
	State: NC				
APPLICANT*: Same A	s Above	_ Mailing Address:_Sa	me As Above		
city: Fayetteville *Please fill out applicant inform	State: NC;	Zip: 28303 Contact No	910-486-4864	Email:_Stacysin	nmons@hhhomes.com
CONTACT NAME APPLY	ing in office: Stacy Sir	nmons	Phone	# <u>910-486-486</u>	1
ADDRESS: 537 F	alls Greek Drive	ACX 99	PIN: 0515-02-	0994	
DEED OR OTP: 3790					
PROPOSED USE:					
SFD: (Size 42 x 5	8_) # Bedrooms: 4_ # Baths (Is the bonus room finished	Basement(w/wo bath): Garage: Deck: Deck: closet? () yes () no (if	Crawl Space: yes add in with # bedr	Slab: Slab: Slab:
Mod: (Sizex_) # Bedrooms # Baths_ (Is the second floor finished	Basement (w/wo bat	h) Garage: Site Buil	lt Deck: On Fran	neOff Frame
Manufactured Home:	SW DW TW (Size	ex) # Bedr	ooms: Garage:(site	built? Deck:	site built?
Duplex: (Sizex) No. Buildings:	No. Bedrooms l	Per Unit:		
Home Occupation: # F	Rooms:Use:_		Hours of Operation:	#	Employees:
Addition/Accessory/O	ther: (Sizex) Use:		2. (Carlotte - 1987) 1970 - 19	Closets in addition	on? () yes () no
Sewage Supply: Nev	nty Existing Well v Septic Tank Expansion Environmental Health Checklis land, own land that contains a	(Need to Complete Ne RelocationEx st on other side of applica	w Well Application at the sam isting Septic Tank Courtion if Septic)	e time as New Tank) nty Sewer	
	any easements whether under		yes () no		
Structures (existing or prop	osed): Single family dwellings:	Proposed Manu	factured Homes:	Other (specify):	
If normits are granted dare	ee to conform to all ordinances g statements are accurate and	and laws of the State of correct to the best of my	knowledge. Permit subject to	th work and the specific revocation if false info	cations of plans submitted. ormation is provided.
***It is the owner/applical	nts responsibility to provide	Owner's Agent the county with any ap	Da	te he subject property, i	ncluding but not limited

to: boundary information, house location, underground or overhead easements, etc. The county or its employees at 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**

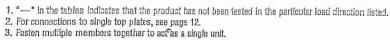
APPLICATION CONTINUES ON BACK

strong roots · new growth

Refrestation Wood Double 1 (b) Refrest

Most mich	
Shipping	

Model Oty No. Regd			Fasteners				P Allowable	Lo	ads		SPF Allowable Loads			
					Uplift		Parallel		Perp. to	Uplift		Parallel		
NO.	nec	Raft	ers	To Plates	(133	3) (16	0) Plate (F (133/16		Plate (F. (133/16)		3) (16	0) Platé (F (133/16)		
H2.5	1	5-8	d	5-8d	418	418	5 150		150	368	36	5 130	130	
H5A	1	3-8	d	3-8d	350	420	115		180	245	. 24	100	120	
HGA10	1 1	4-SDS1	4x11/2	4-SDS1/4x3	3 435	435	1165		940	375	. 375	870	B15	
H5	i	4-8	d	4-8d	455	465	115		200	265	268	100	170	
H1 -	1	6-8dx	11/2	4-8d	490	585	485		165	400	400	415	140	
H2.5A	1	5-80	i	5-8d	600	600	110	1	110	520	535	110	110	
LTS12	13.1	6-10dx	11/2	6-10dx11/2	720	720	75	1	. 125.	620	620	. 75	125	
H8	1.1.	5-10dx	11/2	5-10dx11/2	,620	745		1.	: :	530	565			
H10-2	1	6-100	d	6-10d	760	760	455		395	655	655	390	340	
H2.5	2	10-80	4	i 0-8d	830	830	300	1	300	730	730	260	260	
H5	2	8-8d		/8-8d	910	930	230	1.	400	530	530	. 200	. 340	
H10	ोत्र	8-8dx1	1/2	- 8-8dx1½ ·	7.11	990	585 /	1 :	· 525 ·	. 780	850	505	450	
MTS12	1	7-10dx	11/2	7-10dx1½	840	1000	75	1	125	730	860	75	125	
H1	2	12-8dx1	1/2	8-Bd	980	1170	970		330	800	800	830	280	
12.5A	2	10-8d		10-8d	1200	1200	220		220	1040	1070	220	220	
TS12	. 2	12-10dx	1/2	12-10dx11/2	1440	1440	150		250	1240	1240	150	250 :	
ITS20	1.	12-10dx	1/2:	12-10dx1½	: 1450	1450	75		125	1245	1245	75	125	
1165	1	2-10dx1	1/2 1	i0-10dx11/2	1470	1470	_		11	1265	1265	_		
16	1	2-10dx1		0-10dx11/2	1470	1470	-		-	1265	1265			
1010	2	16.8dx1	视型	6-8dx11/2	1810	1980	∄ 1170.±;		اد 050.	1560	1700	//1010	.900	
TS121	2			4-j0dx1/2		** * * * *	150 🐪					150	250	



MTS12 (LTS, HTS similar)



Two

H2.5A



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 21/2" must be used when connectors are installed on the



H16

