

*Each section below must be filled out by whoever is performing the work. Must be owner or licensed contractor. Address, company name & phone must match information on state license.

Application # _____

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

COMMERCIAL

Application for Building and Trades Permit

Owner's Name: Interstate Outdoor, Inc. Date: 4/12/08

Site Address: NC 27 E. Coats RD - 0680-96 Phone: 919-738-1708
1470.000

Directions to job site from Lillington: Take Highway 27
towards Coats. Sign is on the left just past
McLamb Rd.

Subdivision: N/A Lot: N/A

Description of Proposed Work: Rebuild existing wooden billboard sign
Heated SF N/A Unheated SF N/A

General Contractor Information: Building Cost \$ 10,000.00

Interstate Outdoor, Inc.

Building Contractor's Company Name

P.O. Box 124 Selma, NC 27576

Address



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

919-738-1708

Telephone

kevin@interstatead.com

Email Address

N/A

License #

Electrical Contractor Information: Electrical Cost \$ 1,000.00

Description of Work Lighting for billboard Service Size: 100 Amps #T-Poles N/A

J. Johnson Electric

Electrical Contractor's Company Name

3431 Barber Mill Rd. Clayton, NC 27520

Address



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

919-235-8663

Telephone

jjohnson@jjelectric.com

Email Address

20164

License #

Mechanical Contractor Information: Mechanical Cost \$ _____

Description of Work _____ # Units _____

Mechanical Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Plumbing Contractor Information: Plumbing Cost \$ _____

Description of Work _____ # Baths _____

Plumbing Contractor's Company Name _____ Telephone _____

Address _____ Email Address _____

Signature of Owner/Contractor/Officer(s) of Corporation _____ License # _____

Insulation Contractor Information

Insulation Contractor's Company Name & Address _____ Telephone _____

***NOTE: General Contractor must fill out and sign the second page of this application**

Sprinkler Contractor Information

Sprinkler Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Fire Alarm Contractor Information

Fire Alarm Contractor's Company Name _____

Telephone _____

Address _____

Email Address _____

Signature of Officer(s) of Corporation _____

License # _____

Driveway Access - NC Department of Transportation Driveway Access/Permit? Yes No

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 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 charged at full price per current fee schedule.



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

4/12/23

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.

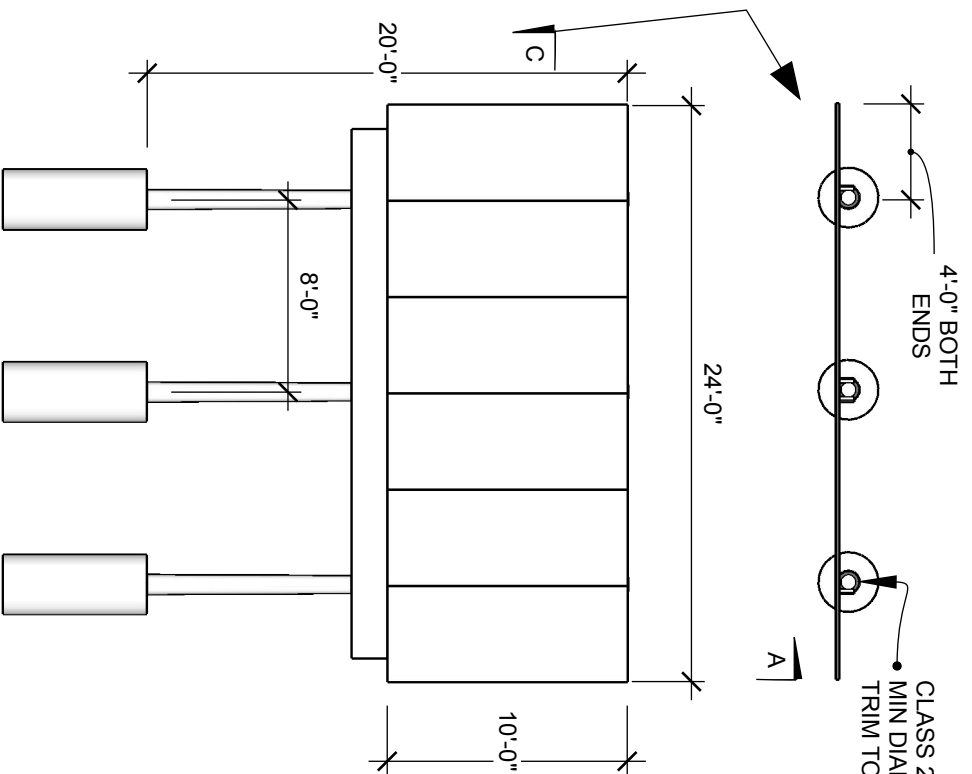
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.

Has no more than two (2) employees and no subcontractors.

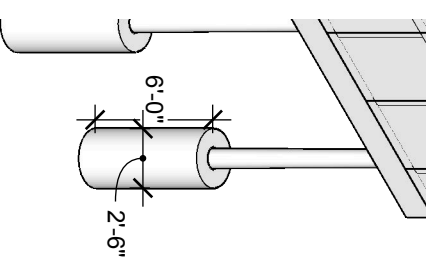
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.

Company or Name: Interstate Adbor, Inc.

Sign w/Title:  - Operations Manager Date: 4/12/23



ELEVATION VIEW
SCALE 1/8" = 1'-0"



ISO VIEW OF FOOTING
NO SCALE

CLASS 2 POLE (35 FT LONG)
MIN DIAMETER ~7.95" AT END
TRIM TOP OF 35' POLE TO REQUIRED HEIGHT

2X6 TREATED
TYP FOR
PERIMETER
AND INTERIOR

(2) 12' PCS
FOR 24' LGTH

DESIGN CRITERIA 245-205

LOCATION: 825 Brogden Rd
Smithfield, NC 27577
35.493215, -78.348129
Elev 146 FT

MEANS OF COMPLIANCE
2015 International Building Code
ASCE 7-10

RISK CATEGORY II
WIND DESIGN

VULT 118 mph
VASD 90 mph

WIND EXPOSURE CATEGORY C
SEISMIC DESIGN

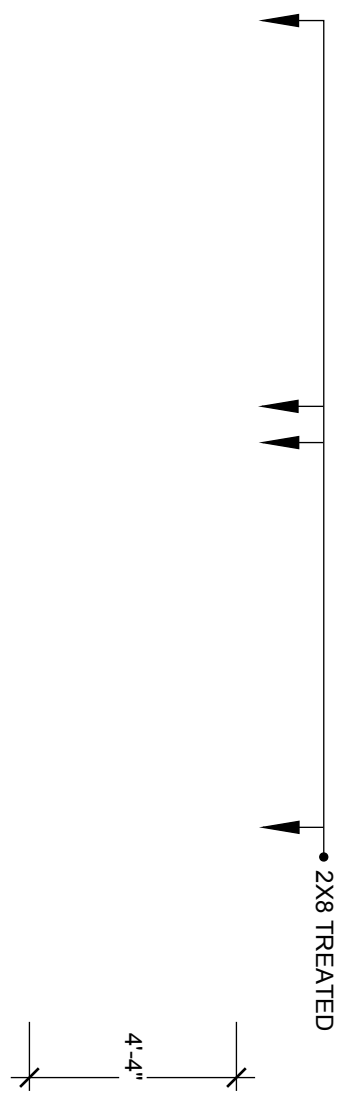
IMPORTANCE FACTOR 1
SOIL CLASS D

SDS 0.17 g
SD1 0.123 g

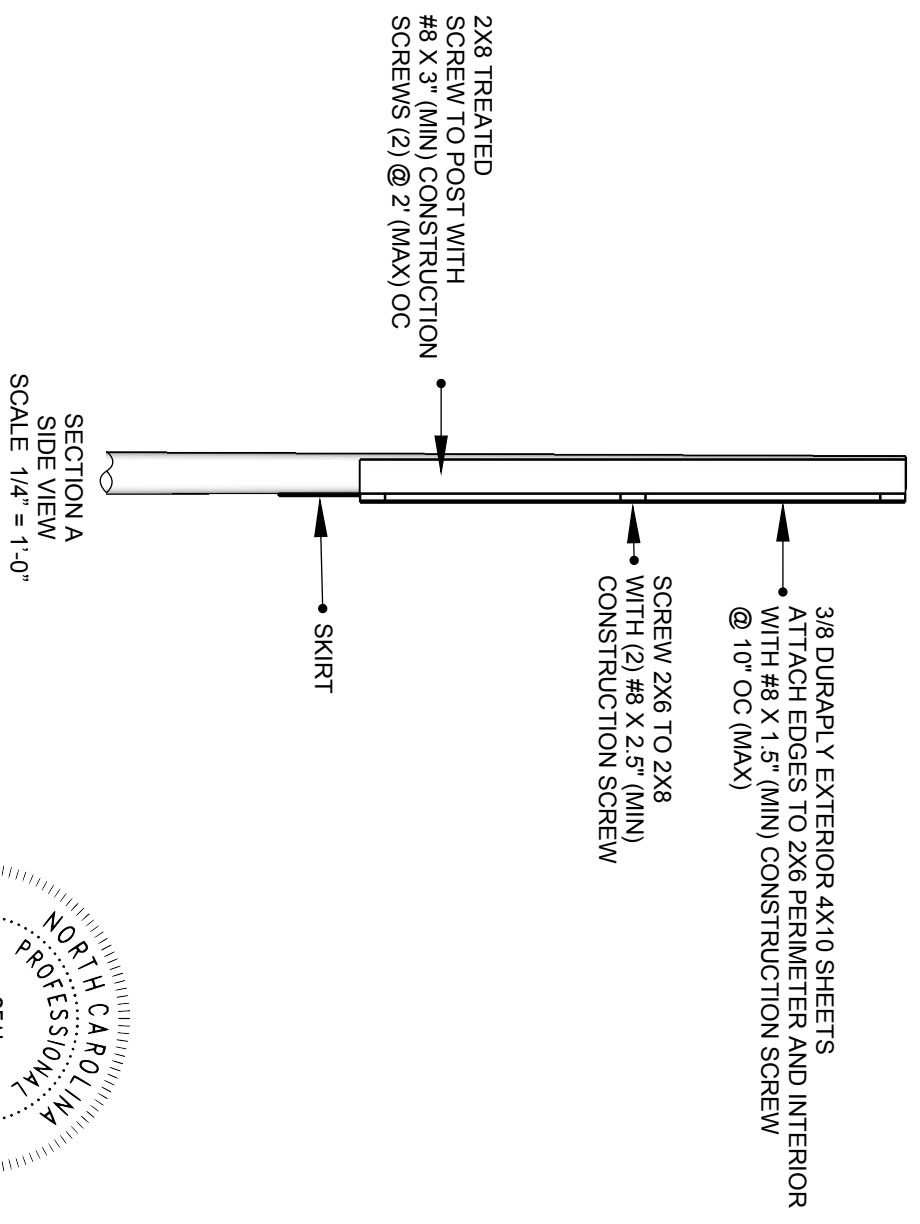
SEISMIC DESIGN CATEGORY B
SOIL CAPACITY 2500 psf

FLOOD ZONE - AREA OF MINIMAL FLOOD HAZARD
NOTES:

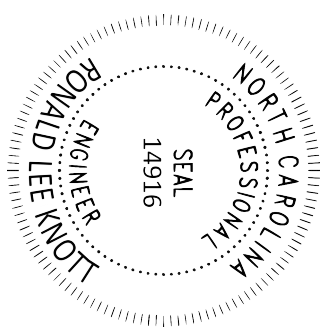
ALL WELDS 3/16 FILLET ALL-AROUND UNLESS NOTED
ALL BOLTS 3/4" A325N
CONCRETE 3000 PSI
PIPES ARE 50 KSI MIN YIELD STRENGTH



BACK VIEW
SCALE 1/4" = 1'-0"



SECTION A
SIDE VIEW
SCALE 1/4" = 1'-0"



WOODEN SIGN
LOCATION
825 Brogden Rd
Smithfield, NC 27577

CLIENT
InterState Outdoor, Inc.
212 North Raiford St
Selma, NC 27576

REVISION
0
ISSUE
6/24/22

DESCRIPTION
DETAILS

ENGINEER
Ronald L Knott, P.E.
801 Cricket Knoll Rd
Fuquay Varina, NC 27526
(919)417-1962