

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

Owner's Name: Christopher Petoletti	Date: 09/04/2020
Site Address: 93 Bennett Rd, Coats, NC, 27521	
Subdivision:	
Description of Proposed Work: Installation of solar panels to existing roof of home.	Total Job Cost: \$13,456.00
General Contractor Information	
Southern Exposure Builders inc. Peter Piacente	914-906-6799
Building Contractor's Company Name	Telephone
125 Pier View Street Unit 207 Daniel Island, SC 29492	soexpbldr@gmail.com
Address	Email Address
<u>U.74886</u>	
License # Electrical Contractor Information	1
Description of Work Installation of solar panels to pre-existing roof of house. Service Size:	²⁵ Amps T-Pole: Yes No
Total Solar Solutions - Tim Kinney	(843) 670-8440
Electrical Contractor's Company Name	Telephone
1041 Planters Curve Mt. Pleasant, SC 29464	timkinney10@gmail.com
Address U.27029	Email Address
License #	
Mechanical/HVAC Contractor Information	ation
Description of Work	
•	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
1: "	
License # Plumbing Contractor Information	1
Description of Work	<u>-</u> _# Baths
Description of Work	_# Dauis
Plumbing Contractor's Company Name	Telephone
,	
Address	Email Address
License #	_
Insulation Contractor Information	1
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.

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Karlou Kootch	09/04/2020
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Competent The undersigned applicant being the:	nsation N.C.G.S. 87-14
General Contractor Owner _X Of	ficer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the person set forth in the permit:	(s), firm(s) or corporation(s) performing the work
X Has three (3) or more employees and has obtained w	orkers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtain them.	ned workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance
Has no more than two (2) employees and no subcont	ractors.
While working on the project for which this permit is sought in Department issuing the permit may require certificates of cost to issuance of the permit and at any time during the permitted carrying out the work.	verage of worker's compensation insurance prior
Sign w/Title: Karley Kestch - Project Manage	Date: 09/04/2020