

Application #

* 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. 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

	Date: <u>08/17/202</u> 0
Site Address: 2274 Cameron Road, Broadway NC 275	05 Phone: 704-492-4451
Subdivision:	Lot;
Description of Proposed Work: 18 ground mounted solar pa	nels, grid tied with 5.76KW. Array 329.40 sq ft
General Contractor Inform	ation
Power Home Solar	919-300-7976
Building Contractor's Company Name	Telephone
919 N Main St Mooresville NC, 28115	permitNCSC@powerhome.com
Address	Email Address
60946	
License #	nation
Description of Work Same Electrical Contractor Inform	nation Size: <u>200 Amps T-Pole: ∏</u> Yes <u>M</u> No
Power Home Solar	919-300-7976
Electrical Contractor's Company Name	Telephone
919 N Main St Mooresville NC, 28115	permitNCSC@powerhome.com
Address	Email Address
26074-U	
License #	
Mechanical/HVAC Contractor Ir	
Description of Work N/A	
Machanical Contractoria Company None	Talankana
Mechanical Contractor's Company Name	Telephone
Address	Email Address
, iddi ooo	Millian / Idai 000
License #	
Plumbing Contractor Inform	<u>nation</u>
Description of Work N/A	# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
· · · · · · · · · · · · · · · · · · ·	
License # Insulation Contractor Inform	mation
N/A	::MAIO!!
Insulation Contractor's Company Name & Address	Telephone
the state of the s	······································

*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 Corpor	08/17/2020 ation Date	
Affidavit for Worker's	Compensation N.C.G.S. 87-14	
The undersigned applicant being the:		
X General Contractor Owner	Officer/Agent of the Contractor or Owner	
Do hereby confirm under penalties of perjury that t set forth in the permit:	he person(s), firm(s) or corporation(s) performing the work	
X Has three (3) or more employees and has c	btained workers' compensation insurance to cover them.	
Has one (1) or more subcontractors(s) and them.	has obtained workers' compensation insurance to cover	
Has one (1) or more subcontractors(s) who covering themselves.	has their own policy of workers' compensation insurance	
Has no more than two (2) employees and n	o 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: General	Contractor Date: 08/17/2020	



Initial Application Date: 08/17/2020

Initial Application I	Date: 08/17/2020	Appl	ication#
		OF HARNETT RESIDENTIAL LAND USE APPLICA	CU#
Central Permit	ing 108 E. Front Street, Lillington	on, NC 27546 Phone: (910) 893-7525 ext:2	Fax: (910) 893-2793 www.harnett.org/permits
	,	OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED	WHEN SUBMITTING A LAND USE APPLICATION**
		Mailing Address: 2274 Ca	
City: Broady	way State: NC	Zlp: 27505 Contact No: 704-492-4451	Email: tacam@bellsouth.net
APPLICANT*: Peter DeNicola Mailing Address: 919 N Main St			
City: Mooresville State: NC Zip: 28115 Contact No: 919-300-7976 Email: permitNCSC@powerhome.com *Please fill out applicant information if different than landowner			
ADDRESS:	Marrier	PIN:	······
Zoning:	_Flood: Watershed:	: Deed Book / Page:	
Setbacks Fro	nt: Back:	_ Side: Corner:	
PROPOSED USE	: :		Monolithic
SFD: (Size		us:Basement(w/wo bath):Garage:De ed? () yes () no_w/ a closet? () yes () :	ck:Crawl Space:Slab:Slab:
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Fram			
☐ Duplex: (Size	x) No. Bulldings:	No. Bedrooms Per Unit;	·
☐ Home Occupa	tion: # Rooms:Use	e; Hours of Operation:	#Employees:
🛛 Addition/Acces	ssory/Other: (Sizex) Us	se:solar installation	Closets in addition? () yes () no
Water Supply:CountyExisting WellNew 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 TankExpansion RelocationExisting Septic TankCounty 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 () no			
	or proposed): Single family dwelling	,	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.			
	Baran J.		8/17/2020 Date
Signature of Owner or Owner's Agent Date ***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

strong roots · new growth



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

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT
OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

Environmental Health New Septic System

- All property irons must be made visible. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property**.
- All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.

Environmental Health Existing Tank Inspections

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place**. (Unless inspection is for a septic tank in a mobile home park)
- DO NOT LEAVE LIDS OFF OF SEPTIC TANK

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

	######################################			
<u>SEPTIC</u>				
If applying for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one,			
{ } Accepted	{ } Innovative { } Conventional { } Any			
{ } Alternative	{ } Other			
The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:				
{ }YES {√NO	Does the site contain any Jurisdictional Wetlands?			
{ }YES {√}NO	Do you plan to have an <u>irrigation system</u> now or in the future?			
{ }YES {∑ NO	Does or will the building contain any drains? Please explain.			
YES { }NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?			
{ }YES {\sum_} NO	Is any wastewater going to be generated on the site other than domestic sewage?			
{ }YES {♥}NO	Is the site subject to approval by any other Public Agency?			
{ }YES {\sum_} NO	Are there any Easements or Right of Ways on this property?			
{✓}YES {_}NO	Does the site contain any existing water, cable, phone or underground electric lines?			
	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.			
	ion And Certify That The Information Provided Herein is True, Complete And Correct. Authorized County And State			
Officials Are Granted Rigi	nt Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I			
Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site				
Accessible So That A Com	plete Site Evaluation Can Be Performed.			