

Application # _____

Each section below to be filled out by whomever performing work. Must be owner or licensed contractor. Address, company name & phone must match 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

on on license:) I	
Owner's Name: Gregory Vought Site Address: 115 Edge Combe Deive	Date: 9/23/20	
Site Address: 115 Edge combe Deive	Phone: 253-68685	
Subdivision:		
Description of Proposed Work:		
General Contractor Inf	ormation_	
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 #	formation	
Description of Work Star Panels Servi	ice Size: Amns T-Pole: Tyes T No	
DII O. I	040 000 7070	
Electrical Contractor's Company Name	Telephone	
919 N Main St Mooresville NC, 28115 Address 27 Roof mount 3dd 26074-U License # Tr Stalled ON exc	Email Address	
26074-U = 27 Roof mount 3dle 26074-U = Fr stalled on eve	ak madules, skid tied, Figur	
License #	187113 Structure	
Mechanical/HVAC Contract	or Information	
Description of Work		
Mechanical Contractor's Company Name	Telephone	
Address	Email Address	
License #		
Plumbing Contractor In	<u>formation</u>	
Description of Work		
	# Baths	
Plumbing Contractor's Company Name	# Baths	
	# Baths Telephone	
	Telephone	
Address		
	Telephone	
License #	Telephone Email Address	
Address License # Insulation Contractor In	Telephone Email Address	
License #	Telephone Email Address	

*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.

Bryan J. Jans

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

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 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: General Contractor Date: 9/23/20		



Initial Application Date:	Application #		
···	CU#		
COUNTY OF HARNETT RESIDENTIA Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (9)	L LAND USE APPLICATION		
**A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & S	TE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION™		
City-Speing Lake State: NC ZID2838) Contact No:	Address: 115 Edse Combe Drive		
City: Yeing Lake State: NC ZID 28350 Contact No:	Email: Heremi + NCSC @ Privachomo. Con		
APPLICANT*: Peter DeNicola Mailing Address: 919	N Main St		
City: Mooresville State: NC Zip: 28115 Contact No: *Please fill out applicant information if different than landowner	919-300-7976 Email: permitNCSC@powerhome.com		
ADDRESS:PI	N:		
Zoning: Flood: Watershed: Deed Book / P	age:		
Setbacks - Front: Back: Side: Con	ner:		
PROPOSED USE:			
SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath (ls the bonus room finished? () yes () no w/ a	Monolithic): Garage: Deck: Crawl Space: Slab: Slab: closet? () yes () no (if yes add in with # bedrooms)		
☐ Mod: (Sizex) # Bedrooms # Baths Basement (w/wo bath (Is the second floor finished? () yes () noAn			
Manufactured Home: _SW _DW _TW (Sizex) # Bedro	ooms: Garage:(site built?) Deck:(site built?)		
Duplex: (Sizex) No. Buildings: No. Bedrooms F	Per Unit:		
Home Occupation: # Rooms: Use: Home Occupation: Home Use:	fours of Operation:#Employees:		
Addition/Accessory/Other: (Sizex) Use: 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 TankExpansionRelocationExisting 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			
Does the property contain any easements whether underground or overhead ()	yes no		
- Structures (existing or proposed): Single family dwellings: Manu	factured 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	9/23/20		

Signature of Owner or Owner's Agent

***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

- <u>All property irons must be made visible</u>. 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"

SEPTIC If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.				
	Accepted	{ } Innovative { } Conventional { } Any		
{ } A	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:				
{ }YF	es (X) no	Does the site contain any Jurisdictional Wetlands?		
{ }YI	ES {X}NO	Do you plan to have an irrigation system now or in the future?		
{ }YI	es (X) no	Does or will the building contain any drains? Please explain.		
{ }YI	es (X) no	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?		
{ }YI	ES (X) NO	Is any wastewater going to be generated on the site other than domestic sewage?		
{ }YI	es {X}no	Is the site subject to approval by any other Public Agency?		
{ }YI	ES { X }-NO	Are there any Easements or Right of Ways on this property?		
{ }YI	ES (X) 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.		

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Soiely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.