



Initial Application Date: _____

Application # _____

CU# _____

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Central Permitting 108 E. Front Street, Lillington, NC 27546 Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION

LANDOWNER: Anthony Davis Mailing Address: 59 Tralee Ct.

City: Fuquay Varina State: NC Zip: 27526 Contact No: (443) 418-1750 Email: A_davis222@yahoo.com

APPLICANT*: Encor Solar LLC Mailing Address: 3401 N Thanksgiving Way #150

City: Lehi State: UT Zip: 84043 Contact No: (512) 489-9919 Email: permits@encorsolar.com

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Annabelle Dyck-McCrary, Encor Solar LLC Phone # (512) 489-9919

ADDRESS: 3401 N Thanksgiving Way #150, Lehi, UT 84043 PIN: 653-35-4896.000

DEED OR OTP: _____

PROPOSED USE:

SFD: (Size ___x___) # Bedrooms:___ # Baths:___ Basement(w/wo bath):___ Garage:___ Deck:___ Crawl Space:___ Slab:___ Monolithic Slab:___ (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedrooms)

Mod: (Size ___x___) # Bedrooms___ # Baths___ Basement (w/wo bath)___ Garage:___ Site Built Deck:___ On Frame___ Off Frame___ (Is the second floor finished? () yes () no Any other site built additions? () yes () no

Manufactured Home: ___SW ___DW ___TW (Size ___x___) # Bedrooms: ___ Garage:___ site built? ___ Deck:___ site built? ___

Duplex: (Size ___x___) No. Buildings:___ No. Bedrooms Per Unit:___

Home Occupation: # Rooms:___ Use:___ Hours of Operation:___ #Employees:___

[X] Addition/Accessory/Other: (Size ___x___) Use: Installation of PV system Closets in addition? () yes [X] no

Water Supply: ___ County ___ Existing Well ___ New 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 Tank ___ Expansion ___ Relocation ___ Existing Septic Tank ___ County 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:___ Manufactured 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.

Annabelle Dyck-McCrary Signature of Owner or Owner's Agent

1/19/2021 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

Harnett County Central Permitting

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits

**Certification of Work Performed By Owner/Contractor
(Individual Trade Application)**

Owner (s) of Structure: Anthony Davis Phone: (443) 418-1750

Owner (s) Mailing Address: 59 Tralee Ct.
Fuquay Varina, NC 27526

Land Owner Name (s): Anthony Davis Phone: (443) 418-1750

Construction or Site Address: 59 Tralee Ct.

PIN # 653-35-4896.000 Parcel # 0653-35-4896.000

Job Cost: 29,121.47 Description of Work to be done Installation of PV system

Mechanical: New Unit With Ductwork New Unit Without Ductwork Gas Piping Other

Electrical*: 200 Amp <200 Amp Service Change Service Reconnect Other
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap Number of Baths Water Heater

Specific Directions to Job from Lillington:

Subdivision: AVERY POND PH 3B Lot #: 184

I Brian Rollins, Encor Solar LLC will provide the electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 1.32830 or 1985119, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Encor Solar LLC
Contractor's Company Name
3401 N Thanksgiving Way #150, Lehi, UT 84043
Address
1.32830 or 1985119
License #

513 544-5964
Telephone
permits@encorsolar.com
Email Address

Structure Owner / Contractor Signature: Brian Rollins Date: 1/19/2021

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

***Company name, address, & phone must match information on license**

Certificate Of Completion

Envelope Id: C650F8CFD2CD472281835AB951527818	Status: Completed
Subject: Anthony Davis: Harnett County - Building Permit Application	
Source Envelope:	
Document Pages: 2	Signatures: 0
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Docs Team
Time Zone: (UTC-07:00) Mountain Time (US & Canada)	3401 N Thanksgiving Way Ste 450
	Lehi, UT 84043
	daas@gosolo.io
	IP Address: 98.245.0.150

Record Tracking

Status: Original	Holder: Docs Team	Location: DocuSign
8/31/2020 3:35:16 PM	daas@gosolo.io	

Signer Events

Signature	Timestamp
Completed	Sent: 9/17/2020 2:39:14 PM
	Viewed: 9/17/2020 2:39:27 PM
	Signed: 9/17/2020 2:39:28 PM
Using IP Address: 98.245.0.150	

Daas
daas@gosolo.io
Team
Solo
Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Envelope Sent	Hashed/Encrypted	9/17/2020 2:39:14 PM
Certified Delivered	Security Checked	9/17/2020 2:39:27 PM
Signing Complete	Security Checked	9/17/2020 2:39:28 PM
Completed	Security Checked	9/17/2020 2:39:28 PM

Payment Events

Status

Timestamps