

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

Application for Residential Building and Trades Permit

Owner s Name Frank Tucker Date 2/11/2021

Site Address 70 Character Court,Bunnlevel,North Carolina 28323 Phone 910-574-4044

Directions to job site from Lillington _____

Attached _____

Subdivision _____ Lot _____

Description of Proposed Work Installation of roof-mounted solar array via # of Bedrooms _____

Heated SF _____ Unheated SF 544 Finished Bonus Room? _____ Crawl Space _____ Slab _____

General Contractor Information

NC SOLAR NOW Inc _____ 919-883-9096
Building Contractor s Company Name _____ Telephone _____
2517 Atlantic Ave Raleigh, NC _____ permitting@ncsolarnow.com
Address _____ Email Address _____
69583 _____
License # _____

Electrical Contractor Information

Description of Work Solar Panel Install Service Size 200 Amps T-Pole Yes No
NC SOLAR NOW Inc _____ 919-833-9096
Electrical Contractor s Company Name _____ Telephone _____
2517 Atlantic Ave, Raleigh NC 27604 _____ permitting@ncsolarnow.com
Address _____ Email Address _____
33569 _____
License # _____

Mechanical/HVAC Contractor Information

Description of Work _____
Mechanical Contractor s Company Name _____ Telephone _____
Address _____ Email Address _____
License # _____

Plumbing Contractor Information

Description of Work _____ # Baths _____
Plumbing Contractor s Company Name _____ Telephone _____
Address _____ Email Address _____
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**

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

Jonathan High

2/11/2021

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

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 NC SOLAR NOW Inc

Sign w/Title Permitting Coordinator Jonathan High Date 2/11/2021