

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/occupier or licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Brent Ely	
Site Address: 1195 Michas Way	Phone: <u>334-498-3272</u>
Subdivision:	Lot:
Description of Proposed Work: PV Solar Installation on existing room	of Total Job Cost: 29,600
General Contractor Informa	
Tesla Energy Operations, Inc.	919-583-1032
Building Contractor's Company Name	Telephone
10312 Globe Road Morrisville, NC 27560	hfogleman@tesla.com
Address	Email Address
77560 Limited HEATED SQ FT NA GARAG	E SQ FT NA SF of panels: 851
License #	
Electrical Contractor Inform Description of Work PV Solar Installation on existing roof Service S	<u>1ation</u> Size: 12.75 Kw∆mns T-Pole:
Description of Work PV Solar Installation on existing roof. Service S Tesla Energy Operations, Inc.	919-583-1032
Electrical Contractor's Company Name	Telephone
10312 Globe Road Morrisville, NC 27560	hfogleman@tesla.com
Address	Email Address
U-30801	
License #	
Mechanical/HVAC Contractor In	<u>formation</u>
Description of Work	
Mechanical Contractor's Company Name	Telephone
Address	Email Address
Address	Email Address
License #	
Plumbing Contractor Inform	<u>nation</u>
Description of Work	
Plumbing Contractor's Company Name	Telephone
Address	Email Address
License #	
Insulation Contractor Inforn	<u>nation</u>
Insulation Contractor's Company Name & 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.

Weather Fogleman
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 _X Officer/Agent of the Contractor or Owner	
	ereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work rth in the permit:	
X	_ Has three (3) or more employees and has obtained workers' compensation insurance to cover them.	
them.	_ Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover	
cover	_ Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance ing themselves.	
	_ Has no more than two (2) employees and no subcontractors.	
Departo issu	working on the project for which this permit is sought it is understood that the Central Permitting rtment issuing the permit may require certificates of coverage of worker's compensation insurance prior uance of the permit and at any time during the permitted work from any person, firm or corporation ng out the work.	
Sign \	W/Title: Heather Fogleman Permit Coordinator IV Date: 10.11.21	