

Application #

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

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Matthew and Bobbie Wicker	Date 10/28/202		
Site Address: 2929 Holly Springs Chruch Rd, Broadway,NC 27505	Phone 919-721-9119		
Subdivision:			
Description of Proposed Work: roof-mount PV system			
General Contractor Information			
NC Solar Now	919-833-9096		
Building Contractor's Company Name	Telephone		
2157 Atlantic Ave, Raleigh NC 27604	permitting@ncsolarnow.com		
Address	Email Address		
69583-L HEATED SQ FT GARAGE SO) FT ⁴²²		
License #			
Electrical Contractor Information			
Description of Work wiring and elec work for PV system Service Size: NC Solar Now	²⁰⁰ Amps		
	Telephone		
Electrical Contractor's Company Name 2157 Atlantic Ave, Raleigh NC 27604	•		
Address	permitting@ncsolarnow.com Email Address		
33569-U	Elliali Address		
License #			
Mechanical/HVAC Contractor Inform	ation		
Description of Work			
Mechanical Contractor's Company Name	Telephone		
• •	·		
Address	Email Address		
License #			
Plumbing Contractor Information	<u>n</u>		
Description of Work	# Baths		
Plumbing Contractor's Company Name	Telephone		
Address	Email Address		
License #			
Insulation Contractor Informatio	<u>n</u>		
Insulation Contractor's Company Name & Address	Telephone		
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*NOTE: General Contractor / owner must fill out and sign the second page of this application.

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



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.

10/28/2021

Date

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Affidavit for Worker's Compensation N.C.G.S. 87-14							
The undersigned applicant being the:							
X General	Contractor	Owner	Officer/A	Agent of the Contracto	or 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:							
X 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.							
Department issuito issuance of the carrying out the	ing the permit may e permit and at any Nork	require certifica	ites of coverage	derstood that the Cer e of worker's compens k from any person, fir	sation insurance prior		
Sign w/Title:	James stanish		GC	Date:	10/28/2021		