



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**

Patrick Hobin

Date: 11-17-2021

Owner's Name: \_\_\_\_\_

Site Address: 585 Ruth Circle Fuquay Varina NC 27526 Phone: 919-780-9430

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Description of Proposed Work: \_\_\_\_\_ Total Job Cost: \_\_\_\_\_

**General Contractor Information**

Covenant Solar Tech LLC

919-508-6907

Building Contractor's Company Name

Telephone

1023 South Miami Boulevard Durham NC 27703

info@covenangsolar.com

Address

Email Address

84770 Limited

HEATED SQ FT

GARAGE SQ FT

License #

**Electrical Contractor Information**

Description of Work a 10.95 kW DC Solar Array Roof Mounted Service Size: \_\_\_\_\_ Amps T-Pole: \_\_\_Yes \_\_\_No.

Covenant Solar Tech LLC

919-508-6907

Electrical Contractor's Company Name

Telephone

1023 South Miami Boulevard Durham NC 27703

info@covenantsolar.com

Address

Email Address

34789 Unlimited

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**

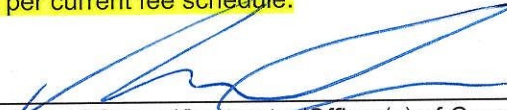
Insulation Contractor's Company Name & Address

Telephone

**\*NOTE: General Contractor / 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.**

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

11-17-2021  
\_\_\_\_\_  
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.

Sign w/Title:  Office Admin Date: 11-17-2021

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

Owner (s) of Structure: Patrick Hobin Phone: 916-402-7771

Owner (s) Mailing Address: 585 Ruth Circle Fuquay Varina NC 27526

Land Owner Name (s): Patrick Hobin Phone: 916-402-7771

Construction or Site Address: 585 Ruth Circle Fuquay Varina NC 27526

PIN # \_\_\_\_\_ Parcel # \_\_\_\_\_

Job Cost: \$8,000.00 Description of Work to be done A 4.38 kW DC Solar Photovoltaic (PV) Installation In A Residential Neighborhood.

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: \_\_\_\_\_ Lot #: \_\_\_\_\_

I Covenant Solar Tech LLC will provide the Electrical labor on this structure.  
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 34789, 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.

Covenant Solar Tech LLC  
Contractor's Company Name  
1023 South Miami Boulevard Durham NC 27703  
Address  
34789  
License # \_\_\_\_\_

919-508-6907  
Telephone  
info@covenantsolar.com  
Email Address

Structure Owner / Contractor Signature:  Date: 11-17-2021

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**