



Application # _____

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

* 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: Samantha and Jeremy Zanolini Date 3/29/2022
Site Address: 330 Timberline Drive Phone 301-876-1260
Subdivision: The Summit Lot 117
Description of Proposed Work: 22 panel roof mount PV system, NCDOL opt 2 Total Job Cost \$46,772.00

General Contractor Information

NC SOLAR NOW INC 919-833-9096
Building Contractor's Company Name Telephone
2509 Atlantic Ave, Raleigh NC 27604 permitting@gmail.com
Address Email Address
69583-L HEATED SQ FT _____ GARAGE SQ FT 437
License # _____

Electrical Contractor Information

Description of Work 22 panel roof mount PV system, NCDOL opt 2 Service Size: 200 Amps T-Pole: Yes No
NC SOLAR NOW INC 919-833-9096
Electrical Contractor's Company Name Telephone
2509 Atlantic Ave, Raleigh NC 27604 permitting@gmail.com
Address Email Address
33569-U
License # _____

Mechanical/HVAC Contractor Information

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

Plumbing Contractor Information

Description of Work cover or relocate vents as per requirements from the authority having jurisdiction # Baths _____
Solar Consultants Inc. 919-815-5576
Plumbing Contractor's Company Name Telephone
601 Old Halifax Rd, Louisburg, NC 27549 fred@solarconsultants.com
Address Email Address
P1 #10250
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.

3/29/2022

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.

Sign w/Title: Sam Catalano, NCSN Permit Specialist Date: 3/29/2022