

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

Application for Residential Building and Trades Permit

& phone must match ation on license.		
Owner's Name: Jhav	⊿ val Cain	Date: <u>7/11/2022</u>
Site Address: 41 Nutmeg Cir Spring Lake NC 28390		
Subdivision:		Lot:
Description of Propos	ed Work: Rooftop Solar Installation 8.8kW(22	Total Job Cost: \$17,600.00
	panels) General Contractor Informatio	<u> </u>
Titan Solar Power N	C Inc	
Building Contractor's	Company Name	Telephone
525 W Baseline Rd Mesa, AZ 85210		ncpermitting@titansolarpower.com
Address		Email Address
84439	HEATED SQ FT GARAGE S	Q FT
License #	8kW(22 panels) Electrical Contractor Information	
Description of Work	Service Size:	on Amps T-Pole: Yes No
Titan Solar Power N		980-285-3407
Electrical Contractor's	Company Name	Telephone
525 W Baseline Rd I	Mesa, AZ 85210	ncpermitting@titansolarpower.com
Address		Email Address
Address U.34445		Email Address
U.34445 License #	Mechanical/HVAC Contractor Inform	mation
U.34445 License #	Mechanical/HVAC Contractor Inform	mation
U.34445 License # Description of Work _		<u>mation</u>
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U.34445 License # Description of Work _ Mechanical Contracto		mation Telephone
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U.34445 License # Description of Work _ Mechanical Contracto Address License # Description of Work _	or's Company Name	mation Telephone Email Address on # Baths
U.34445 License # Description of Work _ Mechanical Contracto Address License # Description of Work _ Plumbing Contractor's Address	or's Company Name	mation Telephone Email Address on _# Baths Telephone
U.34445 License # Description of Work _ Mechanical Contracto Address License # Description of Work _ Plumbing Contractor's	or's Company Name Plumbing Contractor Information s Company Name	mation Telephone Email Address on # Baths Telephone Email Address
U.34445 License # Description of Work _ Mechanical Contracto Address License # Description of Work _ Plumbing Contractor's Address	or's Company Name	mation Telephone Email Address on # Baths Telephone Email 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.

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

7/11/2022

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:
<u>Has three (3) or more employees and has obtained workers' compensation insurance to cover them.</u>
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: Kadsidra Garrett Permitting Coordinator Date: 7/11/2022