

Main House



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 of licensed contractor. Address, company name & phone must match information on license.

Application for Residential Building and Trades Permit

Owner's Name: Nicholas Skatell Date 7/8/22
Site Address: 1565 Chicora rd, Dunn, NC, 28334 Phone 919-820-0469
Subdivision: _____ Lot _____
Description of Proposed Work: 44 solar panels Total Job Cost \$99,871.03

General Contractor Information

Newton Foust 843-469-5117
Building Contractor's Company Name Telephone
8351 Palmetto Commerce Pkwy #203, Ladson, SC, 29456 m.police@tnesisco.com
Address Email Address
84338 _____

Electrical Contractor Information

Description of Work wiring for solar Service Size: 200 Amps T-Pole: Yes No
John LaValley 843-469-5777
Electrical Contractor's Company Name Telephone
8351 Palmetto Commerce Pkwy #203, Ladson, SC, 29456 m.police@tnesisco.com
Address Email Address
34206 _____

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.

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

7/9/22
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: Markus Row

Date: 7/8/22

Application # _____

Harnett County Central Permitting

ton, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Structure: Nicholas Skatell Phone: 919-820-0469
Mailing Address: 1565 Chicora Rd

Site Owner Name (s): Nicholas Skatell Phone: 919-820-0469
Construction or Site Address: 1565 Chicora Rd, Dunn, NC, 28334
PIN # 0596-76-0488.000 Parcel # 060596 0214 06

Job Cost: \$99,871.03 Description of Work to be done 44 solar panels to be installed on roof.

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:

Head E. on Harvey Allen Ln toward Hope Ln, Turn left onto NC-82W slight right onto S 13th St, Turn left onto US 421 N/W Jackson Blvd/US Hwy 421 S, use the left 2 lanes to turn left onto N Main St, Turn right onto McKinney Pkwy.

Subdivision: _____ Lot #: _____

I Newton Foust will provide the building labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 84338, 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.

Sustainable Lighting Solutions LLC
Contractor's Company Name

843-469-5777
Telephone

8351 Palmetto Commerce Pkwy #203, Ladson, SC, 29450
Address

m.police@theselsco.com
Email Address

84338
License #

Structure Owner / Contractor Signature: Maxim Foust Date: 7/8/22

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