

Second 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 or 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: 41 solar panels on roof Total Job Cost \$94,552.18

**General Contractor Information**

Newton Foust 843-469-5777  
Building Contractor's Company Name Telephone  
8351 Palmetto Commerce Pkwy #203, Ladson, SC, 29456 m.police@truseisco.com  
Address Email Address  
84338 \_\_\_\_\_  
License #

**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@truseisco.com  
Address Email Address  
34206  
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

Monster 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: Monster Row

Date: 7/8/22

Application # \_\_\_\_\_

**Harnett County Central Permitting**

PO Box 65 Lillington, NC 27546 - Ph: 910-893-7525 - Fx: 910-893-2793 - www.harnett.org/permits  
Certification of Work Performed By Owner/Contractor  
(Individual Trade Application)

Owner (s) of Structure: Nicholas Skatell Phone: 919-820-0469  
Owner (s) Mailing Address: 1565 Chicora Rd

Land Owner Name (s): Nicholas Skatell Phone: 919-820-0469  
Construction or Site Address: 1565 Chicora rd  
PIN # 0596-76-0488-000 Parcel # 060596021406

Job Cost: \$94,552.18 Description of Work to be done: 41 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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  
8351 Palmetto Commerce Pkwy #203  
Address Ladson, SC, 29450  
84338  
License #

843-469-5777  
Telephone  
m.police@theselisco.com  
Email Address

Structure Owner / Contractor Signature: Mowman 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