

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**

Owner's Name: James Homegardner			Date:	9/1/20	22
Site Address: 145 Barclay Drive Angier NC					
Subdivision:		I ot·			
Description of Proposed Work: Rooftop Sola	ar Installation 6.8kW(17 panels)	Total Job Cost:			
	neral Contractor Information				
Titan Solar Power NC Inc		980-285-3407			
Building Contractor's Company Name		Telephone			
525 W Baseline Rd Mesa, AZ 85210		ncpermitting@titansolarpower.com			
Address		Email Address	<u> </u>		_
84439 HEATED	SQ FT GARAGE SO	FT			
License #					
Rooftop Solar Installation 6.8kW(17 panels) Elec  Description of Work	trical Contractor Information	<u>n</u> ∆mne T-F	ole.	Vac	Νc
Titan Solar Power NC Inc					
Electrical Contractor's Company Name		980-285-3407 Telephone			
525 W Baseline Rd Mesa, AZ 85210		•	ancolarn	owor oc	om.
Address		ncpermitting@titansolarpower.com Email Address			
U.34445		211141171441666			
License #					
<u>Mechani</u>	cal/HVAC Contractor Inform	<u>ation</u>			
Description of Work			=		
<u></u>		<del></del>			_
Mechanical Contractor's Company Name		Telephone			
Address		Email Address			
License #					
<u>Plum</u>	nbing Contractor Information	<u>n</u>			
Description of Work		_# Baths		_	
Plumbing Contractor's Company Name		Telephone			—
Address		Email Address			
License #					
<u>Insul</u>	lation Contractor Informatio	<u>n</u>			
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 <a href="by-signing-below-I have obtained all subcontractors-permission to obtain these permits">by signing below I have obtained all subcontractors-permission to obtain these permits</a> and if <a href="any-changes-any-changes-permit-the-alth-permit-changes-permit-the-alth-permit-changes-permit-the-alth

**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 Qarrett Signature of Owney/Contractor/Officer(s) of Corporation  9/1/2022 Date				
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:				
X 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: Kadeidra Jarrett Permitting Coordinator Date: 9/1/2022				