

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

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

Application for Residential Building and Trades Permit

Owner's Name: Thomas Hunter	Date11/8/2022_
Owner's Name: Thomas Hunter Site Address: 300 Bruce Johnson Rd, Lillington, NC 27546	Phone (910) 890-6865
Subdivision:	LotLOT 1 Map # 2020-424
Description of Proposed Work: roof mounted solar panels grid tied KW	Total Job Cost 59,532.89
General Contractor Information	
Jason Harmon/Top Tier Solar Solutions	855-997-1213
Building Contractor's Company Name	Telephone
1530 Center Park Drive	accountmanager@toptiersolarsolutions.com
Address	Email Address
87345 HEATED SQ FT GARAGE SQ	FT
License #	
Description of Work 36 roof mounted grid tied solar panels, installed on existing structure 13.86 KW Service Size:	<u>1</u> Amns T-Pole: Yes No
installed on existing structure 13.86 KW	
Michael Whitson/Top Tier Solar Solutions Electrical Contractor's Company Name	855-997-1213
, ,	Telephone
1530 Center Park Drive	<u>accountmanager@toptiersolars</u> olutions.com
Address	Email Address
<u>U.35673</u>	
License #	
Mechanical/HVAC Contractor Information	<u>ation</u>
Description of Work	
Mechanical Contractor's Company Name	Telephone
	·
Address	Email Address
License #	
Plumbing Contractor Information	<u>1</u>
	# Baths
Description of Work	_# Datii3
Plumbing Contractor's Company Name	Talanhana
Plumbing Contractor's Company Name	Telephone
A.I.I.	
Address	Email Address
<u> </u>	
License #	•
Insulation Contractor Information	
Insulation Contractor's Company Name & Address	Talankana
INSUIADON 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.

11/8/2022

Wichael David Whitnen

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: Top Tier Solar Solutions
x 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: Michael David Whitson Date: 11/8/2021