

Application #

Harnett County Central Permitting

* 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. PO Box 65 Lillington, NC 27546 910-893-7525 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name: Jimmy Ferguson	Date: 2/8/2023
Site Address: 221 S. Ida St. Coats, NC 27521	Phone: 910-897-2791
Subdivision:	Lot:
Description of Proposed Work: Solar panels installation	
General Contractor Information	
EMPWR Solar, LLP/Kelly Miles	843-867-3962
Building Contractor's Company Name	Telephone
1007 Johnnie Dodds Blvd, Suite 111, Mount Pleasant, SC 29464	permits@empwrsolar.com
Address	Email Address
L.85891 HEATED SQ FT 450.40 GARAGE SC) FT
License # Electrical Contractor Information	•
	<u>u</u> ¹⁰⁰ Amps T-Pole: Yes <u> </u> No
EMPWR Solar LLP/Timothy Bennett	843-867-3962
Electrical Contractor's Company Name	Telephone
1007 Johnnie Dodds Blvd, Suite 111, Mount Pleasant, SC 29464	permits@empwrsolar.com
Address	Email Address
<u>L.34286</u>	
License # Mechanical/HVAC Contractor Inform	ation
	<u>ation</u>
Description of Work	
Mechanical Contractor's Company Name	Telephone
mosnamour Community Name	Тегериене
Address	Email Address
License #	
Plumbing Contractor Information	
Description of Work	_# Baths
Plumbing Contractor's Company Name	Telephone
Address	Email Address
Address	Email Address
License #	
Insulation 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 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.

2/8/2023

kelly Miles

Signature of Owner/Contractor/Officer(s) of Corporation Date					
	Affidavit	for Worker's (Compensation N	I.C.G.S. 87-14	
The	undersigned applicant being t	:he:	-		
Χ	General Contractor	Owner	Officer/Agent	of the Contractor or Owner	
	ereby confirm under penalties orth in the permit:	s of perjury that th	e person(s), firm(s)	or corporation(s) performing the work	
Y Has three (3) or more employees and has obtained workers' compensation insurance to cover them.					
N them		ntractors(s) and h	as obtained workers	s' compensation insurance to cover	
$\frac{N}{covering}$ Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.					
N Has no more than two (2) employees and no subcontractors.					
Depa to iss	artment issuing the permit ma	y require certificat	tes of coverage of w	ood that the Central Permitting rorker's compensation insurance prior any person, firm or corporation	
Sign	w/Title: kully Mi	ເ Genera	l Contractor	Date: 2/8/2023	