

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: Zachary Kennedy		Date 06/08/2023		
Site Address: 5671 ELLIOTT BRIDGE ROAD	Phone	707-321-5678		
Subdivision: Stewarts Creek	Lot			
Description of Proposed Work: Installation of a 13.600 kW roof mounted PV solar system - 34 panel	els Total Job Cost	\$58,245		
General Contractor Information				
Building Contractor's Company Name	Telephone			
Address	Email Address			
HEATED SQ FT GARAGE SQ				
License #	<mark>« ၊ ၊</mark>			
Electrical Contractor Information	<u>n</u>			
Description of Work Installation of a 13.600 kW roof mounted PV solar system - 34 panels Service Size:	Amps I-F	ole:Yes <u>√</u> No		
Freedom Solar, LLC / Chad Preece (Master Electrician)	512-766- Telephone	<u>5765 </u>		
Electrical Contractor's Company Name				
		edomsolarpower.com		
Address	Email Address			
U.34167				
License #	otion			
Mechanical/HVAC Contractor Information				
Description of Work		-		
				
Mechanical Contractor's Company Name	Telephone			
Aller	<u></u>			
Address	Email Address			
Lianna #				
License # Plumbing Contractor Information				
				
Description of Work	_# Baths			
Dlumbing Contractor's Company Name	Tolophono			
Plumbing Contractor's Company Name	Telephone			
Address	Email Address			
Addiess	Liliali 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.

Chad Prese	C.C.	06/08/2023		
Signature of Owner/Contractor/Office	er(s) of Corporation	Date		
Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:				
X General Contractor	Owner	_ Officer/Agent of the C	ontractor 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 employe	ees and has obtaine	ed workers' compensati	on 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: Chad Presce	(Master Elec	trician)		