

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: Mary Jane Mead		Date	
Site Address: 171 Tarleton Drive, Fuquay Varina , NC 27526	Phone	(616)	901-1209
Subdivision: BIRCHWOOD GROVE PH2			
Description of Proposed Work: PV Solar Install / Size: 4 KW DC			. 59
General Contractor Information	_		
Encor Solar LLC	(704) 318-28	58	
Building Contractor's Company Name	Telephone		
3049 Executive Parkway, Suite 300, Lehi, UT 84043	permits@enco	rsolar	.com
Address	Email Address		
L.99580 HEATED SQ FT 211.4 GARAGE SQ	FT		
License #			
Description of Work PV Solar Install / Size: 4 KW DC Service Size:	<u>.</u> 200 Amna T.F	Dolor.	Voc. N
			_resn
Joshua Collins Floatrical Contractor's Company Name	(704) 318-28	58	
Electrical Contractor's Company Name	Telephone		
3049 Executive Parkway, Suite 300, Lehi, UT 84043 Address	permits@enco Email Address	rsolari	. Com
	Elliali Address		
U.35743 License #			
Mechanical/HVAC Contractor Informa	ation		
Description of Work			
		_	
Mechanical Contractor's Company Name	Telephone		
,, ,			
Address	Email Address		
License #			
Plumbing Contractor Information	<u>1</u>		
Description of Work	# Baths		_
Plumbing Contractor's Company Name	Telephone		
Address	Email Address		
License #			
Insulation Contractor Information	<u>1</u>		
Insulation Contractor's Company Name & Address	Telephone		
Insulation Contractor's Company Name & Address	i eleptione		

*NOTE: General Contractor / owner must fill out and sign the second page of this application.

DocuSigned by:



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.

6/28/2023

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:
X General Contractor OwnerX 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 pocusioned by:
Sign w/Title: Date:



Initial Application Date: 6/28/2023

Application # _		

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COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Central Permitting 420 McKinney Pkwy, Lillington, NC 27546 Phone: (910) 893-7525 ext:1 Fax: (910) 893-2793 www.harnett.org/permits	
A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION	
LANDOWNER: Mary Jane Mead Mailing Address: 171 Tarleton Drive	
City: Fuquay Varina State: NC Zip: 27526 Contact No: (616) 901-1209 Email: Mjbmead@gmail.com	
APPLICANT*: Joshua Collins Mailing Address: 3049 Executive Parkway, Suite 300	
City: Lehi State: UT Zip: 84043 Contact No: (704) 318-2858 Email: permits@encorsolar.com	
ADDRESS: 171 Tarleton Drive, Fuquay Varina , NC 27526 _{PIN:} 0642-95-9318.000	
Zoning: Flood: Watershed: Deed Book / Page:	
Setbacks – Front: Back: Side: Corner:	
PROPOSED USE: Monolithic	
□ SFD: (Sizex) # Bedrooms: # Baths: Basement(w/wo bath): Garage: Deck: Crawl Space: Slab: Slab:	
TOTAL HTD SQ FTGARAGE SQ FT (Is the bonus room finished? () yes () no w/ a closet? () yes () no (if yes add in with # bedro	ms)
☐ Modular: (Sizex) # Bedrooms# Baths Basement (w/wo bath) Garage: Site Built Deck: On Frame Off Frame	
TOTAL HTD SQ FT (Is the second floor finished? () yes () no Any other site built additions? () yes () no	
☐ Manufactured Home:SWDWTW (Sizex) # Bedrooms: Garage:(site built?) Deck:(site built?)	
□ Duplex: (Sizex) No. Buildings: No. Bedrooms Per Unit: TOTAL HTD SQ FT	
□ Home Occupation: # Rooms: Use: Hours of Operation: #Employees:	
Addition/Accessory/Other: (Sizex) Use: RESIDENTIAL PV SOLAR INSTALL Closets in addition? () yes () no	
TOTAL HTD SQ FT GARAGE	
Water Supply: County Existing Well New Well (# of dwellings using well) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank) Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer	
(Complete Environmental Health Checklist on other side of application if Septic) Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? () yes () no	
Does the property contain any easements whether underground or overhead () yes (X) no	
Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify):	
If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans subm I hereby state that foregoing statements are signed take and correct to the best of my knowledge. Permit subject to revocation if false information is provided.	ted.
Signaterer of Onwhere for Owner's Agent Date	
It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not lim to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications. *This application expires 6 months from the initial date if permits have not been issued**	ted

APPLICATION CONTINUES ON BACK

strong roots • new growth



This application expires 6 months from the initial date if permits have not been issued

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT

OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

☐ Environmental Health New Septic System

- <u>All property irons must be made visible</u>. Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the <u>undergrowth</u> to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. **Do not grade property**.
- All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.

Environmental Health Existing Tank Inspections

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)
- DO NOT LEAVE LIDS OFF OF SEPTIC TANK

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

<u>SEPTIC</u>		
If applying	for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.
{}} Acce	epted	{}} Innovative {}} Conventional {}} Any
{}} Alte	rnative	{}} Other
	•	the local health department upon submittal of this application if any of the following apply to the property in "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:
{}}YES	{ <u>X</u> } №	Does the site contain any Jurisdictional Wetlands?
{}}YES	{ <u>X</u> } NO	Do you plan to have an <u>irrigation system</u> now or in the future?
{}}YES	{ X } NO	Does or will the building contain any <u>drains</u> ? Please explain.
{}}YES	{ X } NO	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
{}}YES	{ <u>x</u> } №	Is any wastewater going to be generated on the site other than domestic sewage?
{}}YES	{ X } NO	Is the site subject to approval by any other Public Agency?
{}}YES	{ <u>x</u> } №	Are there any Easements or Right of Ways on this property?
{}}YES	{ <u>X</u> } NO	Does the site contain any existing water, cable, phone or underground electric lines?
		If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Application #

Harnett County Central Permitting

Mailing Address - PO Box 65 Lillington, NC 27546 – Physical Address – 420 McKinney PKWY Lillington NC 27546 Ph.: 910-893-7525 - Fax: 910-893-2793 - www.harnett.org/permits

Certification of Work Performed By Owner/Contractor

(Individual Trade Application)

Owner (s) of Structure: Mary Jane Mead	Phone: (616) 901-1209
Owner (s) Mailing Address: 171 Tarleton Drive, Fuquay Varina	, NC 27526
Land Owner Name (s): Mary Jane Mead	Phone: (616) 901-1209
Construction or Site Address: 171 Tarleton Drive, Fuquay Varing	a , NC 27526
PIN # 0642-95-9318.000 Parcel # 080652 000	
Job Cost (Required): 24805.59 Description of Work to be done_PV_So	lar Install / Size: 4 KW DC
(10) HANWHA HANWHA Q.PEAK DUO BLK ML-G10+ 400 / (10) ENPH	HASE IQ8PLUS-72-2-US
Mechanical: New Unit With Ductwork New Unit Without Ductwork	k Gas Piping Other
Electrical*: 200 Amp <200 Amp Service Change Service * For Progress Energy customers we need the premise n	
Plumbing: Water/Sewer Tap Number of Baths W	/ater Heater
Specific Directions to Job from Lillington: Head north on McKinney Pkwy, Turn left onto US-401 N, Turn left onto Tarleton D	n left onto John Stark Dr,
Subdivision: BIRCHWOOD GROVE PH2 Lot #:	188
Joshua Collins will provide the PV SOLAR INSTALL (Contractors Name)	
I am the building owner or my NC state license number is	, which entitles me to
perform such work on the above structure legally. All work shall comply	
other applicable State and local laws, ordinances and regulations.	, and the second
Encor Solar LLC	(704) 318-2858
Contractor's Company Name	Telephone
3049 Executive Parkway, Suite 300, Lehi, UT 84043	permits@encorsolar.com
Address	Email Address
U.35743	
License #	
Structure Owner / Contractor Signature:	Date: 6/28/2023
B9EE2CCE70A3492	

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

Faxed or Mailed application could have an approximately 1-5 day process time